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: Brian Bansner

Address:

has this day been appointed to the position of Police Officer

in the department of

Telephone:

Public Safety- Bureau Of Police

the term to commence

Tune 16, 2008

the term to end

N/A

filling unexpired term of (if applicable,

N/A

Signed

Mayor

Mel Carlais

Title of Official

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: Brian D. Bansner

Address:

has this day been appointed to the position of Sergeant

in the department of Public Safety-Bureau Of Police

the term to commence September 20, 2013

N/A

the term to end

Telephone:

filling unexpired term of (if applicable)

Signed

Mayor

Title of Official

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: Brian D. Bansner

Address:

Telephone:

has this day been appointed to the position of Lieutenant

in the department of Public Safety-Bureau Of Police

the term to commence January 7, 2015

the term to end

N/A

filling unexpired term of (if applicable)

Signed

Mayor

Title of Official

PERFORMANCE EVALUATION REPORT

| NAMI | E (FIRST, LAST, MI) | | | D# | RANK | DIVISION/UNIT |
|---------------------|---|---|-------------|---|--------------------------|---|
| | n Bansner | | | 10 " | | |
| | | | | | CAPT | CID to Pat |
| | TY ASSIGNMENT (I.E. DESK, | | G) · | PERIOD COVERED | FROM | то |
| ÇID | to Patrol Commande | r | | Transfer | 01/01/20 | 04/15/20 |
| OU' In n to g | naking the evaluation of each cat- uidelines established in section 6. | GOOD = 4 ACCEPTA egory below, supervisors are to 15 C (1 through 18) of General | evaluate th | NEEDS IMPROVEN e employee's performance 47 Personnel Performanc | only for the past Twelve | UNSATISFACTORY = 1 month period and compare that performan |
| 1. 1 | DUTY PERFORMANCE (ALL EMPLO | DYEES) | | | | |
| 4 | PERSONAL 5 APPEARANCE | COMMAND PRESENCE | 5 REP | ORT WRITING ABILITY | 4 INTERPE | RSONAL SKILLS (VERBAL) |
| 4 | RESPONSIVENESS 4 TO SUPERVISION | ATTENDANCE | 5 | RELIABILITY | 5 perfo | RMANCE UNDER STRESS |
| 5 . | PERFORMACE 5 | PUNCTUALITY CARE AND USE | | NVESTIGATIVE/PROBI OLVING SKILLS | LEM | |
| 4 | JUDGMENT 4 | OF EQUIPMENT | 5 к | NOWLEDGE OF LAWS | , POLICIES, ETC | |
| 2. D | AYS LOST DURING PERIOD COVER | ED BY THIS REPORT | | | : | |
| SICE | K: 0 INJURED ON-I | OUTY: 0 INJURED | OFF-DU | JTY: 0 OTHER | · O TOTAL C | OCCURENCES: 0 |

| 3. | SUPERVISORY PERSONNEL ONL | Υ |
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4 LEADERSHIP S EFFECTIVENESS OF 4 TRAINING/COACHING SUBORDINATES 5 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.)

This is a transfer evaluation for Brian Bansner. He has been promoted to the rank of Captain and is now the Patrol Division Commander.

During the rating period he has continued to operate at the highest level. He continues to be an asset to the agency and his actions are a result of sound logical thinking.

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

Learn all aspects of the Patrol Division and make necessary changes. He should frequently communicate with the Criminal Investigations Division to accomplish the shared goal of decreasing the crime rate.

| (Goal sett | tings Continue From Front) | | | | · . |
|-----------------|--|---|--|--|--|
| will assi | ant Bansner is the future st this agency in the future ions to create an effective | ure. He should partic | ipate with the administ | continue to mal | ce positive changes thating contract |
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| A. The en | L PERFORMANCE RATING: This of mployee's performance in his/her pridderation of the general needs of the I win to the evaluator. ITSTANDING VERY | esent assignment during the evalu | nation period; AND pilities and characteristics of this em | ployee to all other employ | yces of equal rank and pay grade UNSATISFACTORY |
| | IG COMMANDING OFFC | Name: Edwa | ard Noonan | | 11/ |
| Signature | Edward Noonar | uíc | Deputy Chief of F | Police Date | 7/27/20 |
| | OR REVIEWING WITH EMPLOY Charles S. Kelly Print / S., na | Ran | k Captain | Date | 04/27/00 |
| B. EMPLOYEE' | 'S COMMENTS: (Optional) | | | | • |
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| have received a | 'S SIGNATURE: This signature does a copy of this report. If I do not as or "waive appeal" on this rep | not necessarily indicate agreeme ith this best of have indicated | ent with this report. It verifies that the this by writing "under protest" nex | his report has been person at to my signature. I have Date | nally reviewed with me and that also indicated whether I |

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PERFORMANCE EVALUATION REPORT

| NAME (FIRST, LAST, MI) | | ID# | RANK | DIVISION/UNIT | |
|--|--|--|----------------------------|--|---------------|
| Brian Bansner | | | Lt. | CID | : |
| DUTY ASSIGNMENT (I.E. DESK, STREET PATROI | , BOOKING) | PERIOD COVERED | FROM | TO | |
| CID Unit Supervisor | | Annual | 01/01/19 | 12/31/19 | |
| In making the evaluation of each category below, super- to guidelines established in section 6.15 C (1 through 18 | ACCEPTABLE = 3 visors are to evaluate of General Order # 0 | NEEDS IMPROVEM the employee's performance 12-47 Personnel Performanc | only for the past Twelve n | UNSATISFACTORY = 1 onth period and compare to | hat performan |
| 1. DUTY PERFORMANCE (ALL EMPLOYEES) | | | | | 1 1 |
| 4 PERSONAL 5 COMMAND PLAPPEARANCE | resence 5 re | PORT WRITING ABILITY | 4 INTERPER | SONAL SKILLS (VERBAI | -) |
| 4 RESPONSIVENESS 3 ATTENDANCE TO SUPERVISION | 5 | RELIABILITY | 5 perfor | MANCE UNDER STRESS | |
| 5 PERFORMACE 4 PUNCTUALITY CARE AND US | | INVESTIGATIVE/PROBL SOLVING SKILLS | EM | | |
| 4 JUDGMENT 4 OF EQUIPMEN | | KNOWLEDGE OF LAWS, | POLICIES, ETC | | |
| 2. DAYS LOST DURING PERIOD COVERED BY THIS REPOR | T . | | | | |
| SICK: 6 INJURED ON-DUTY: 0 | NJURED OFF-L | OUTY: 0 OTHER: | O TOTAL O | CCURENCES: 6 | |

| SUPERVISORY PERSONNEL ONLY |
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4 LEADERSHIP 5 EFFECTIVENESS OF 4 TRAINING/COACHING 5 EVALUATION OF QUALITIES DELEGATION OF SUBORDINATES 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.)

Performance: Lt. Bansner engages in self-initiated activity and produces excellent work. The work is thorough and always on time. He has dozens of tasks and he is truly outstanding as he completes all his responsibilities.

Command Presence: Throughout the rating period the Lieutenant has spent time as the Tactical Unit Commander and the Special Investigation Section Commander. Lieutenant Bansner has maintained a positive image and has had good control over his subordinates.

Reliability: Throughout the rating period the Lieutenant has shown great organizational skills and consistently meets each and every deadline. He is able to take a command staff investigation and complete it without guidance.

Report Writing Ability: Lieutenant Bansner is able to clearly express himself in writing. The reports that are completed are clear, concise, and free of errors. The paperwork submitted from Lieutenant Bansner is excellent and needs no alterations.

Investigative and Problem Solving Skills: He explores all reasonable avenues of investigation and follows leads to their logical conclusion. He continues to evaluate the full range of options for solution and strives to instill this way of thinking on his subordinates.

Knowledge Of Laws, Policies, etc.: He knows the laws applicable to his assignment. He also possesses outstanding knowledge of department policies and procedures. When a question is at hand, he will do the necessary research to find the correct conclusion.

Performance Under Stress: Lt. Bansner is exceptional when dealing with abnormal stress generated during critical incidents. His actions are a result of sound and logical thought without confusion.

Effectiveness of Delegation: Lt. Bansner understands how much independence and autonomy can be granted to each employee and knows what tasks should and should not be delegated. The Lieutenant handles the issues which should be handled at command staff level and delegates other issues accordingly.

Evaluation of Subordinates: Formal and informal evaluations of both Sergeant's and Officer's occurs on a daily basis. Lieutenant Bansner knows the capabilities of all employees under his command and his opinions are valued by the entire command staff.

| | <u> </u> |
|--|---|
| How can this employee best improve his/her performance? (Include setting Career /Performance Goals). Lt. Bansner could improve his performance by embedding himself in the day to day operations of his Unithink with effective time management he could spend more time at the operations level. Being involved at | the |
| operations level will breed an effective team. His subordinates will witness his strong work ethic and this v | vill |
| motivate them to become a more efficient team. | |
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| | • |
| (Goal settings Continue From Front) | |
| Lieutenant Bansner is the future of the Utica Police Department. He should continue to attend trainings inc the FBI National Academy. He should also strive for a higher position in the agency or a position that will increase his span of control. | luding |
| mercase his span of control. | |
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| ☐ OUTSTANDING ☑ VERY GOOD ☐ ACCEPTABLE ☐ NEEDS IMPROVEMENT ☐ UNSATISFAC | CTORY |
| 6. REVIEWING COMMANDING OFFCIF | |
| Signature Edward Noonap Deputy Chief of Police Date | 20 |
| Prin/ | |
| 7. SUPERVISOR REVIEWING WITH EMPLO | |
| Signature Charles S. Kelly Date 01/00/0 | 020 |
| Print/Signature | |
| EMPLOYEE'S COMMENTS: (Optional) | • |
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| EMPLOYEE'S SIGNATURE: This signature does not agree with the signature does not agree with the second with the report. It verifies that this report has been personally reviewed with me a have received a copy of this report. If I do not agree with the report of this personal with the second with the report of this report. If I do not agree with the report of this personal with the report of the report of this personal with the report of the report | |
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PERFORMANCE EVALUATION REPORT

| | Œ (FIRST, LAST, MI) | | | ID# | RANK | | DIVISION/UNIT |
|----------------------|--|---|--|--|-------------|--------------------------|--|
| | ian Bansner | | | | LT. | j | CID/SIS |
| | | DESK, STREET PATROL, BOOKE | NG) | PERIOD COVERED | FRO |)M | TO . |
| ecti | on Commander | | | Annual | 01/0 |)1/18 | 12/31/18 |
| EXC In m to gu | aking the evaluation of e uidelines established in se | GOOD = 4 ACCEPT each category below, supervisors are t ection 6.15 C (1 through 18) of Genera | ABLE = 3 to evaluate the Al Order # 02 | NEEDS IMPROVEMI ne employee's performance o 2–47 Personnel Performance | nly for the | past Twelve month r | TISFACTORY = 1 eriod and compare that performan |
| 1. υ | UTY PERFORMANCE (ALI | LEMPLOYEES) | | | | | |
| 4 | GENERAL APPEARANCE | 5 ASSIGNMENT TASKS | 5 | WORK QUALITY | 4 | KNOWLEDGE OF | LAWS, POLICIES, ETC. |
| 4 | RESPONSIVENESS TO SUPERVISION | 4 ATTENDANCE | 5 | RELIABILITY | 5 | REPORT WRITIN ABILITY | G |
| 5 | . INITIATIVE | 4 PUNCTUALITY | | INVESTIGATIVE/PROBLE SOLVING SKILLS | м 4 | INTERACTION W | ITH PUBLIC |
| | | CARE AND USE | | INTERACTION WITH OTE | HER MEM | BERS | |
| | | OF EQUIPMENT | 4 | OF THE DEPARTMENT | 17 | | |
| 5 | JUDGMENT 4 | OF EQUIPMENT | - T | OF THE DELAKTMENT | | and the second second | |
| 5 | COMMAND | PERFORMANCE | | COMMUNICATION | | | · |

4 LEADERSHIP 5 EFFECTIVENESS OF 4 TRAINING/COACHING 5 EVALUATION OF OUR DELEGATION OF SUBORDINATES 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.)

Lieutenant Bansner has 4 completed years as a Lieutenant. He is the Section Commander for the Special Investigations Section. This section contains the Special Investigations Unit, Warrants Unit, Tactical Unit, Community Outreach and Nuisance Abatement. During the rating period he has no negative notations in his electronic folder. He has limited sick uses numbering 2 for the entire calendar year. He scores excellent in several performance categories. Lieutenant Bansner tends to take initiative to gather the information and tools needed to get a task completed on time and above expectations. He shows the ability to come up with new solutions for problems when old ways of thinking are ineffective. He clearly understands strengths of team members and delegates accordingly between his three Sergeants. His report writing ability and work quality are the very best in the division. Since he is in charge of a proactive unit he is tasked with several internal investigations. The investigations are flawless and submitted in a timely manner.

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

Lt. Bansner could improve his performance by embedding himself in the day to day operations of his Units. I think with effective time management he could spend more time at the operations level. Being involved at the operations level will breed an effective team. His subordinates will witness his strong work ethic and this will motivate them to become a more efficient team.

| (Goal settings Continue From Front) | | | | |
|--|--|--|-----------------------|--|
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| 4. OVERALL PERFORMANCE RATING: This overall rating is A. The employee's performance in his/her present assignment | to be based on the follo | wing factors: | | |
| A. The employee's performance in his/her present assignment. B. Consideration of the general needs of the Department, conknown to the evaluator. | t during the evaluation iparing the capabilities | period; AND and characteristics of this emplo | yee to all other empl | oyees of equal rank and pay grade |
| en de la seconda de la sec La seconda de la seconda d | of Appletonics | a Market (1964) a bask of talling Talket (1964) | 4 · • · · · | |
| EXCELLENT GOOD A | CCEPTABLE | ☐ NEEDS IMPROV | EMENT _ | UNSATISFACTORY |
| 5. REVIEWING COMMANDING OFFCIER: (Imry | |)an | | - 12/ |
| Signature Deputy Chief E. Noon | auk | DC | Date | 2/3/19 |
| Print / Signative | uk _ | DC | Date | 2/3/19 |
| Print/Sig_dure 6. SUPERVISOR REVIEWING WITH EMP Signature Charles S. Kelly | Rank | DC Capt | Date Date | 01/09/19 |
| 6. SUPERVISOR REVIEWING WITH EMPTSIGNATURE Charles S. Kelly Prin dantire | Rank _ | | | 01/09/19 |
| Print/Sig_dure 6. SUPERVISOR REVIEWING WITH EMP Signature Charles S. Kelly | Rank | | | 01/04/19 |
| 6. SUPERVISOR REVIEWING WITH EMPTSIGNATURE Charles S. Kelly Prin dantire | Rank _ | | | 01/89/19 |
| 6. SUPERVISOR REVIEWING WITH EMPTSIGNATURE Charles S. Kelly Prin dantire | Rank _ | | | 01/31/19 |
| 6. SUPERVISOR REVIEWING WITH EMPTSIGNATURE Charles S. Kelly Prin dantire | Rank _ | | | 01/89/19 |
| Print / Sigdure 6. SUPERVISOR REVIEWING WITH EMP Signature Charles S. Kelly Print 7. EMPLOYEE'S COMMENTS: (Optional) 8. EMPLOYEE'S SIGNATURE: This signature does not necessarian | udicate agreement | Capt | Date Date | 2/3//9 01/34/19 onally reviewed with me and that |
| 6. SUPERVISOR REVIEWING WITH EMPOSIGNATURE Charles S. Kelly Prin. 7. EMPLOYEE'S COMMENTS: (Optional) | udicate agreement | Capt | Date Date | onally reviewed with me and that re also indicated whether I |

LEADERSHIP

OUALITIES

EFFECTIVENESS OF

DELECATION

PERFORMANCE EVALUATION REPORT

| | ie (first, last, m ian Bansner | .) | •• | | ID# | RAN. | | DIVISION/UNIT SIS |
|----------------------|-----------------------------------|---------------------------------|--|-----------|---|--------|--------------------|--|
| DU' | TY ASSIGNMENT (I. | E. DESK, | STREET PATROL, BOOKE | NG) | PERIOD COVERED | | ОМ | TO |
| | on Commando | | • | -, | Annual | | 01/17 | 12/31/17 |
| EXC In m to gu | nucinies established in | GOOD f each cat section 6 | = 4 ACCEPT egory below, supervisors are a .15 C (1 through 18) of Genera | o evaluat | NEEDS IMPROVEMEN te the employee's performance only 402-47 Personnel Performance Ev | for th | a neet Turding man | VSATISFACTORY = 1 th period and compare that performa |
| 1. D | UTY PERFORMANCE (| LL EMPL | OYEES) | | | | | |
| 4 | GENERAL APPEARANCE | 4 | ASSIGNMENT TASKS | 4 | WORK QUALITY | 4 | KNOWLEDGE | OF LAWS, POLICIES, ETC. |
| 1 | RESPONSIVENE TO SUPERVISIO | | ATTENDANCE | 5 | RELIABILITY | 5 | REPORT WRI | ring |
| 5 | INITIATIVE | 4 | PUNCTUALITY | 4 | INVESTIGATIVE/PROBLEM SOLVING SKILLS | 4 | INTERACTION | WITH PUBLIC |
| | | | CARE AND USE | • • • • | INTERACTION WITH OTHER | R MEI | UBERS | |
| | | | | | | | | |
| 4 | JUDGMENT | 4 | OF EQUIPMENT | 4 | OF THE DEPARTMENT | | | |
| 4 | JUDGMENT COMMAND | 4 | OF EQUIPMENT PERFORMANCE | 4 | OF THE DEPARTMENT COMMUNICATION | | | |

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.)

TRAINING/COACHING

OF SUBORDINATES

EVALUATION OF

SUBORDINATES

During the 2017 rating period Lieutenant Bansner continues to excel in many areas of work. He once again rates excellent in several categories.

Initiative: Lieutenant Bansner takes appropriate action when something needs to be accomplished. Internal and precautionary investigations are undertaken by this lieutenant with ease. He knows what actions need to be taken and completes them in a competent manner. The member is self-reliant and makes critical decisions without oversight.

Command Presence: Throughout the rating period the Lieutenant has spent time as the Tactical Unit Commander and the Special Investigation Section Commander. Lieutenant Bansner has maintained a positive image and has had good control over his subordinates.

Reliability: Throughout the rating period the Lieutenant has shown great organizational skills and consistently meets each and every deadline. He is able to take a command staff investigation and complete it without guidance.

Report Writing Ability: Lieutenant Bansner is able to clearly express himself in writing. The reports that are completed are clear, concise, and free of errors. The paperwork submitted from Lieutenant Bansner is excellent and needs no alterations. It was noted that in September 2017 he turned in 3 investigative packets all were complete and free of errors.

Supervisory Qualities: As noted in previously evaluations Lieutenant Bansner continues to rate above acceptable in all categories. His evaluation of subordinates is top notch and he knows how to staff his units with productive members. The statistical data from all of his units is impressive.

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

Lieutenant Bansner should continue to work with other command staff members of the Utica Police Department. Lieutenant Bansner should continue to build strong relationships with the other Lieutenants and Sergeants within CID to create a more informed and diverse division. Career advancement is a possibility and I am sure Lieutenant Bansner is more than capable attaining a higher-ranking position within the department.

(Continue on Back)

| (Goal settings Continue from Front) | | | |
|--|--------------------------|----------------|--|
| I would like to see Lieutenant Bansner involved in more day to da some Tactical Unit shifts and special operations. With the additio involved in narcotics cases to assist and lead Sergeant Murphy in | n of Sgt. Mur | phy in SIU I w | ike him to work ould like him to be |
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| <u> </u> | ristics of this employed | · . | s of equal rank and pay grade |
| Signature Deputy Chief E. Noonan Rank | DC | Date | |
| Print / Signature | | | |
| 6. SUPERVISOR REVIEWING WITH EMPLOY Signature Charles S. Kelly Print/ | Capt | Date | 01/17/18 |
| 7. EMPLOYEE'S COMMENTS: (Optional) | | | |
| [12] A. | | · . | |
| 8. EMPLOYEE'S SIGNATURE: This signature does not necessarily indicate agreement with this report. | | | |
| 8. EMPLOYEE'S SIGNATURE: This signature does not necessarily indicate agreement with this report. | | | |

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| TO: | Report all personnel changes to this Send ONE COPY prior to payroll affected by SUPPLEMENTARY PAYROLL CERTIFICA REPORT OF PERSONNEL CHANG | this change TION AND GE | MONTH 04 DAY 14 YEAR 2020 |
|---------------------------|---|-------------------------------|---|
| | ivil Service Commission | NAME OF EMPLOYEE: | |
| FROM: (Check or | | Bansner, Bria | n D |
| City | | ADDRESS: | |
| DEPARTMENT: | | | |
| | Pepartment | TITLE OF POSITION: | SALARY: |
| NAME AND TITI | LE OF LAST EMPLOYEE IN POSITION: | Captain | § 107,881. |
| 1 | | ☐ Veteran ☐ Disabled Vet | ☐ Non-Veteran |
| | | DATE OF BIRTH: | leran Exempt Volunteer Fireman SOCIAL SECURITY NUMBER: |
| | | | SOCIAL SECOND PROPERTY OF THE |
| | Check Nature of Personnel Change | Date Effective | |
| | Permanent | Dute Effective | Action Necessary by Appointing Officer: |
| | ☐ Provisional | | Return report of Certification |
| Α | | | Attach application (MSD-330) |
| P · | | From: To: | State length of employment |
| o | proj | From: To: | Give facts under Remarks |
| I | == 1.07 Territor Crince | From: To: | Give facts under Remarks |
| N . | Permanent Promotion | 4/14/20 | Return report of Certification |
| M . | Provisional Promotion | | Attach nomination |
| E N | Non-Competitive Class | | Attach application (MSD-330) |
| т | Exempt Class | · | Submit this form only |
| S | Labor Class | | Attach application (MSD-330) |
| | Resignation | | Submit signed resignation |
| E R T | Retirement | | Give effective date |
| MI | ☐ Deceased | | Indicate date |
| IO | Removal | | Attach copy of proceedings |
| A S | Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| 1 | Military Leave of Absence | | Give facts under Remarks |
| . [[| Other Leave of Absence | From: To: | Give facts under Remarks |
| 0 [| Transfer | | Give facts under Remarks |
| T | Demotion | | |
| H E | Suspension | | Give facts under Remarks |
| ъ 1 | T Reinstatement | | Give facts under Remarks |
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| i F | 7 | | Indicate new saalry |
| E - | - Change in Name | | Give facts under Remarks |
| S Larks: (Continue on | | | Give facts under Remarks |
| • | to Captain eff. 4/14/20 | Appointing Officer | M. Willes |
| .75% con | tract inc. eff. 4/1/20. | Title | Chief of Police |
| | tract inc. eff. 4/1/19 | Address | AUTOL ALL AUTO |
| .1 3 /0 0011 | maci iiic. eii. 4/1/19 | # | |
| 0000000 | | | |
| CERTIFICAT valid until | | | |
| vana until | employment is in accordance with | Ву | |
| | Law and Rules made in pursuance | | |
| | to law Catherine to any Decree | | |
| (Date) | to law. Subject to any limitation or condition specified above. | Date | |

| | | | | |
|--------------|---|---|-------------------------|---|
| | | Report all personnel changes to this Send ONE COPY prior to payroll affected by SUPPLEMENTARY PAYROLL CERTIFICA REPORT OF PERSONNEL CHAN | this change TION AND | DATE 2020 |
| TO: | · · · | TELONI OF FEIGONINE CHAIN | NAME OF EMPLOYEE: | MONTH 04 DAY 01 YEAR 2020 |
| Utica (| Civil Service | Commission | Bansner, Bri | an D |
| FROM: (Chec | | | ADDRESS: | |
| X Cit | | Town Village or District | | |
| DEPARTMEN | | | TITLE OF POSITION: | orienti. |
| | Department | | Lieutenant | <u>98,072.</u> |
| NAME AND | TITLE OF LAST EMPLOY | EE IN POSITION: | Veteran | ☐ Non-Veteran |
| | | | Disabled V | Veteran Exempt Volunteer Fireman SOCIAL SECURITY NUMBER: |
| | | | DATE OF BIXTH: | SOCIAL SECURITY NUMBER: |
| - | | Check Nature of Personnel Change | D. 1 F. 1 | |
| | Permaner | | <u>Date Effective</u> | Action Necessary by Approinting Officer: |
| | Provision | | | Return report of Certification |
| Α . | Temporar | | T | Attach application (MSD-330) |
| . P | Substitute | · · · · · · · · · · · · · · · · · · · | From: To: | State length of employment |
| o · | For Term of | | From: To: | Give facts under Remarks |
| I N | | Promotion | From: To: | Give facts under Remarks |
| T | | Promotion | | Return report of Certification |
| M E | 710151016 | | | Attach nomination |
| N . | Exempt Cla | etitive Class | · | Attach application (MSD-330) |
| T S | Labor Class | | | Submit this form only |
| T | Resignation | | | Attach application (MSD-330) |
| E | Retirement | | | Submit signed resignation |
| R T M I | Deceased Deceased | | | Give effective date |
| ΙO | Removal | | | Indicate date |
| N N A S | | - CTAII Thi I.A | | Attach copy of proceedings |
| | 1 = =================================== | of Work or Funds) | | Give facts under Remarks |
| | = | ve of Absence | | Give facis under Remarks |
| 0 | Other Leave | or Absence | From: To: | Give facts under Remarks |
| O T | Transfer Demotion | | | Give facts under Remarks |
| H | - | | | Give facts under Remarks |
| E R | Suspension Reinstatemen | | | Give facts under Remarks |
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| A · N | | · · · · · · · · · · · · · · · · · · · | 44400 | Submt form MSD-222 |
| ·G | | | 4/1/20 | Indicate new saalry |
| E S | Change in Na Other | me | | Give facts under Remarks |
| | te on back if necessary) | | <u>. L </u> | Give facts under Remarks |
| | contract inc. e | eff. 4/1/20. | Appointing Officer | Mark J. William |
| 75% ^ | ontract inc. e | ff 4/1/10 | Title | Chief of Police |
| | | | Address | STREET OF T ORIGINAL |
| origevii | ty inc. eff. 6/1 | 0/10 | E | |
| | ICA TIT | | | |
| CERTIFI | | This certifies that the above | | |
| valid ı | unuli | employment is in accordance with Law and Rules made in pursuance | By | |
| | | Law and rules indue in pursuance | | |
| , | | | | |
| (Date | re) | to law. Subject to any limitation or condition specified above. | Date | |

| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this of SUPPLEMENTARY PAYROLL CERTIFICATION REPORT OF PERSONNEL CHANGE | AND | MONTH 04 DAY 01 YEAR 2019 |
|---------------------|---|------------------------------------|--|
| Utica | Civil Service Commission | NAME OF EMPLOYEE: Bansner, Bria | n D |
| FROM: (Chec | y County Town Village or District | ADDRESS; | |
| Police | ਸ: Department | TITLE OF POSITION: | SALARY: \$ 94,528. |
| | TITLE OF LAST EMPLOYEE IN POSITION: | Veteran | Non-Veteran |
| | <u>_</u> | Disabled Vet | |
| | | DATE OF BIRTH: | SOCIAL SECURITY NUMBER: |
| | Check Nature of Personnel Change | <u>Date Effective</u> | Action Necessary by Appointing Officer: |
| | Permanent | | Return report of Certification |
| 1 . | Provisional | | Attach application (MSD-330) |
| A P | ☐ Temporary | From: To: | State length of employment |
| P | Substitute | From: To: | Give facts under Remarks |
| 0 1 | For Term of Office | From: To: | Give facts under Remarks |
| N | Permanent Promotion | | Return report of Certification |
| T M | Provisional Promotion | | Attach nomination |
| E | Non-Competitive Class | | Attach application (MSD-330) |
| N T | Exempt Class | | Submit this form only |
| s | Labor Class | | Attach application (MSD-330) |
| T | Resignation | | Submit signed resignation |
| E R T | Retirement | | Give effective date |
| MI | Deceased . | | Indicate date |
| I O N N | Removal | | Attach copy of proceedings |
| A S | Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| | Military Leave of Absence | | Give facts under Remarks |
| | Other Leave of Absence | From: To: | Give facts under Remarks |
| О | ☐ Transfer | | Give facts under Remarks |
| T H | ☐ Demotion | | Give facts under Remarks |
| E | ☐ Suspension | | Give facts under Remarks |
| R | Reinstatement | | Give facts under Remarks |
| С | Change in Classification | | Give facts under Remarks |
| H | New Position | | Submt form MSD-222 |
| A N · | Change in Salary | 4/1/19 | Indicate new saalry |
| G E | Change in Name | | Give facts under Remarks |
| ร็ | Other | | Give facts under Remarks |
| | ontract inc. eff. 4/1/19 | ₿ Appointing Officer | Marl William |
| opaevit | y inc. eff. 6/16/18 | Title | Chief of Police |
| - | - | Address | - VIIIOI VI I VIIIOG |
| new Cor | ntract salary changes eff. 4/1/18 | | |
| CERTIFIC valid u | | Зу | |
| (Date | | Date . | |

| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this cha SUPPLEMENTARY PAYROLL CERTIFICATION AI REPORT OF PERSONNEL CHANGE | nge ND | MONTH 06 DAY 16 YEAR 2018 |
|--------------------------------|--|-------------------------------------|---|
| | Civil Service Commission | NAME OF EMPLOYEE: Bansner, Brian | |
| FROM: (Check City DEPARTMENT | County Town Village or District | ADDRESS: | |
| Police I | Department | Lieutenant | SALARY: \$ 91,111. |
| NAME AND TI | TLE OF LAST EMPLOYEE IN POSITION: | Veteran Disabled Veter | Non-Veteran Exempt Volunteer Fireman |
| | | DATE OF BIRTH: | SOCIAL SECURITY NUMBER: |
| | Check Nature of Personnel Change | Date Effective | Action Necessary by Appointing Officer: |
| | Permanent | 2 110 2//00002 | Return report of Certification |
| | Provisional | | Attach application (MSD-330) |
| A | Temporary | From: To: | |
| P | Substitute | From: To: | State length of employment |
| 0 | For Term of Office | | Give facts under Remarks |
| I N | Permanent Promotion | From: To: | Give facts under Remarks |
| т | Provisional Promotion | <u> </u> | Return report of Certification |
| M E | | | Attach nomination |
| N | | | Attach application (MSD-330) |
| T S | | | Submit this form only |
| T | | | Attach application (MSD-330) |
| E | | | Submit signed resignation |
| RТ | | | Give effective date |
| M I I O | | | Indicate date |
| NN | P== | <u> </u> | Attach copy of proceedings |
| A S | Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| | Military Leave of Absence | | Give facts under Remarks |
| | Other Leave of Absence | From: To: | Give facts under Remarks |
| O T | Transfer | • | Give facts under Remarks |
| H , | Demotion Demotion | | Give facts under Remarks |
| E | Suspension | | Give facts under Remarks |
| R | Reinstatement | | Give facts under Remarks |
| C | Change in Classification | · | Give facts under Remarks |
| H A | New Position | | Submt form MSD-222 |
| N | Change in Salary | 6/16/18 | Indicate new saalry |
| G E | Change in Name | | Give facts under Remarks |
| S | Other | | Give facts under Remarks |
| Longevi | ty inc. eff. 6/16/18 | • | March Millian |
| New Co | ntract salary changes eff. 4/1/18 | Appointing Officer | 1 100 10 11 10 was |
| | pp. 6/8/18 | | Chief of Police |
| | | Address | |
| | | | |
| CERTIF | ICATE This certifies that the above | | |
| valid | | | |
| | employment is in accordance with Law and Rules made in pursuance | Ву | |
| | to law, Subject to any limitation or | | |
| . (Dat | | Date | |
| | | | , |

| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this cha SUPPLEMENTARY PAYROLL CERTIFICATION A REPORT OF PERSONNEL CHANGE | ND | MONTH 06 DAY 08 YEAR 2018 |
|--------------------|---|-------------------------------------|---|
| Utica C | Civil Service Commission | NAME OF EMPLOYEE: Bansner, Brian | |
| FROM: (Check City | County Town Village or District | ADDRESS: | |
| | Department | TITLE OF POSITION: | SALARY: \$ 90,227. |
| NAME AND TI | TLE OF LAST EMPLOYEE IN POSITION: | Veteran | ☐ Non-Veteran |
| | | Disabled Vetera | Exempt Volunteer Fireman |
| | | DATE OF BIRTH: | SOCIAL SECURITY NUMBER: |
| | Check Nature of Personnel Change | Date Effective | Action Necessary by Appointing Officer: |
| ľ | Permanent | | Return report of Certification |
| | Provisional | | Attach application (MSD-330) |
| ·A P | Temporary | From: To: | State length of employment |
| P | ☐ Substitute | From: To: | Give facts under Remarks |
| 0 | For Term of Office | From: To: | Give facts under Remarks |
| I N | Permanent Promotion | | Return report of Certification |
| T | Provisional Promotion | | |
| M E | Non-Competitive Class | | Attach nomination |
| N | Exempt Class | | Attach application (MSD-330) |
| T S | Labor Class | | Submit this form only |
| T , | | | Attach application (MSD-330) |
| E | | | Submit signed resignation |
| RT | Retirement | | Give effective date |
| M I | Deceased . | | Indicate date |
| NN | Removal | | Attach copy of proceedings |
| A S | Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| | Military Leave of Absence | | Give facts under Remarks |
| | Other Leave of Absence | From: To: | Give facts under Remarks |
| 0 | Transfer | | Give facts under Remarks |
| T H | Demotion | | Give facts under Remarks |
| E | Suspension | | Give facts under Remarks |
| R | Reinstatement | | Give facts under Remarks |
| С | Change in Classification | | Give facts under Remarks |
| H A | New Position | | Submt form MSD-222 |
| N | Change in Salary | 4/1/18 | Indicate new saalry |
| G E | Change in Name | | Give facts under Remarks |
| S | Other . | | Give facts under Remarks |
| | e on back if necessary) ntract salary changes eff. 4/1/18 18 | Appointing Officer | Word II. Milled |
| | | Title | Chief of Police |
| | | Address | |
| CERTIF | ICATE This certifies that the above | | |
| valid | | Rv | |
| | Law and Rules made in pursuance | Ву | |
| | to law. Subject to any limitation or | | |
| (Dat | | Date | |
| | | | |

| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this ch SUPPLEMENTARY PAYROLL CERTIFICATION A | ange ND | DATE |
|-------------------|---|---------------------------------|---|
| TO: | REPORT OF PERSONNEL CHANGE | NAME OF EMPLOYEE: | MONTH 05 DAY 09 YEAR 2017 |
| Utica C | ivil Service Commission | Bansner, Brian D |) |
| FROM: (Check | only one) | ADDRESS: | |
| City | County Town Village or District | | |
| DOLICO I | : Department | TITLE OF POSITION: | S-LARY: |
| | TLE OF LAST EMPLOYEE IN POSITION: | Lieutenant | B 3,384 |
| NAME AND II | TLE OF LAST EMPLOTEE IN POSITION: | Veteran | ☐ Non-Veteran |
| | | Disabled Veteran DATE OF BIRTH: | Exempt Volunteer Fireman SOCIAL SECURITY NUMBER: |
| | | | poetro de esta esta esta esta esta esta esta est |
| | Check Nature of Personnel Change | Date Effective | Action Necessary by Appointing Officer: |
| | Permanent | gest Lifteened | Return report of Certification |
| | Provisional | | |
| A P | Temporary | From: To: | Attach application (MSD-330) State length of employment |
| P | Substitute | From: To: | Give facts under Remarks |
| 0 | For Term of Office | From: To: | Give facts under Remarks |
| N N | Permanent Promotion | 10. | Return report of Certification |
| T M | Provisional Promotion | | Attach nomination |
| E E | Non-Competitive Class | | Attach application (MSD-330) |
| N T | Exempt Class | | Submit this form only |
| S | Labor Class | | Attach application (MSD-330) |
| T | Resignation | | Submit signed resignation |
| E R T | Retirement | | Give effective date |
| M I | Deceased Deceased | | Indicate date |
| I O N N | Removal | | Attach copy of proceedings |
| A S | Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| | Military Leave of Absence | | Give facts under Remarks |
| , | Other Leave of Absence | | Give facts under Remarks |
| 0 | Transfer | T | Give facts under Remarks |
| T H | Demotion | | Give facts under Remarks |
| E | Suspension | | Give facts under Remarks |
| R | Reinstatement | | Give facts under Remarks |
| С | Change in Classification | | Give facts under Remarks |
| H A | New Position | | Submt form MSD-222 |
| N [| Change in Salary | | ndicate new saalry |
| G E | Change in Name | | Sive facts under Remarks |
| S | Other | 5/9/17 | live facts under Remarks |
| :marks; (Continue | on back if necessary) | Appointing Officer Title | Mulhay Chief of Police |
| | Ŧ | Address | |
| CERTIFIC | CATE THE TOTAL OF | | |
| valid u | | D., | |
| THE U | ntil employment is in accordance with Law and Rules made in pursuance | Ву | |
| | to law. Subject to any limitation or | | • |
| (Date | | Date | |
| | | , | |

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| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this c SUPPLEMENTARY PAYROLL CERTIFICATION REPORT OF PERSONNEL CHANGE | change AND | MONTH 12 DAY 02 YEAR 2016 | | |
|--------------|---|----------------------------------|--|--|--|
| TO: | 2.110 | NAME OF EMPLOYEE: | NAME OF EMPLOYEE: | | |
| | Civil Service Commission | Bansner, Brian | D | | |
| FROM: (Check | | ADDRESS: | | | |
| DEPARTMENT | т. | TITLE OF POSITION: | SALARY: | | |
| Police | Department | Lieutenant | § 83,384 | | |
| NAME AND T | ITLE OF LAST EMPLOYEE IN POSITION: | ☐ Veteran | Non-Veteran | | |
| | | Disabled Vetera | lead * * * * * * * * * * * * * * * * * * * | | |
| | | DATE OF BIRTH: | SOCIAL SECURITY NUMBER: | | |
| | <u>Check Nature of Personnel Change</u> | <u>Date Effective</u> | Action Necessary by Appointing Officer: | | |
| | Permanent | | Return report of Certification | | |
| | Provisional | | Attach application (MSD-330) | | |
| A P | Temporary | From: To: | State length of employment | | |
| P | Substitute | From: To: | Give facts under Remarks | | |
| 0 | For Term of Office | From: To: | Give facts under Remarks | | |
| N | Permanent Promotion | | Return report of Certification | | |
| T M | Provisional Promotion | | Attach nomination | | |
| E | Non-Competitive Class | | Attach application (MSD-330) | | |
| N T | Exempt Class | | Submit this form only | | |
| s | Labor Class | | Attach application (MSD-330) | | |
| Т | Resignation | | Submit signed resignation | | |
| E R T | Retirement | | Give effective date | | |
| M I | Deceased | | Indicate date | | |
| I O N N | Removal | | Attach copy of proceedings | | |
| A 5 | Layoff (Lack of Work or Funds) | | Give facts under Remarks | | |
| | Military Leave of Absence | | Give facts under Remarks | | |
| | Other Leave of Absence | From: To: | Give facts under Remarks | | |
| 0 | Transfer | | Give facts under Remarks | | |
| T H | Demotion | | Give facts under Remarks | | |
| E | Suspension | | Give facts under Remarks | | |
| R | Reinstatement | | Give facts under Remarks | | |
| C | Change in Classification | | Give facts under Remarks | | |
| H A | New Position | | Submt form MSD-222 | | |
| N | Change in Salary | | Indicate new saalry | | |
| G E | Change in Name | | Give facts under Remarks | | |
| S | X Other | 12/1/16 | Give facts under Remarks | | |
| | atract increase effective 10/1/15 | Appointing Officer Title Address | Manh Milland Chief of Police | | |
| CERTIF | | | | | |
| Valid | | Ru | | | |
| | employment is in accordance with Law and Rules made in pursuance | Ву | | | |
| | to law. Subject to any limitation or | | • | | |
| (Da | te) condition specified above. | Date | <u> </u> | | |
| | | | | | |

| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this | change | DATE |
|--|--|--------------------------|---|
| | SUPPLEMENTARY PAYROLL CERTIFICATION | N AND | |
| 70. | REPORT OF PERSONNEL CHANGE | | MONTH 09 DAY 23 YEAR 2015 |
| Utica C | Civil Service Commission | NAME OF EMPLOYEE: | D . |
| FROM: (Check | | Bansner, Brian | <u>U</u> |
| ⋉ City | County Town Village or District | and the second | |
| DEPARTMENT | | TITLE OF POSITION: | SALARY: |
| | Department | Lieutenant | s 83,384 |
| NAME AND T | ITLE OF LAST EMPLOYEE IN POSITION: | Veteran | ☐ Non-Veteran |
| | | DATE OF BIRTH: | |
| | | DATE OF BIRTH: | SOCIAL SECURITY NUMBER: |
| | Check Nature of Personnel Change | Date Effective | Astian Marsacom In Association Officer |
| | Permanent | Dute Offection | Action Necessary by Appointing Officer: |
| | Provisional | | Return report of Certification |
| A | ☐ Temporary | From: To: | Attach application (MSD-330) |
| P P | Substitute | From: To: | State length of employment |
| 0 | For Term of Office | From: To: | Give facts under Remarks |
| I N | Permanent Promotion | FIOLE 10: | Give facts under Remarks |
| T | Provisional Promotion | · | Return report of Certification |
| M E | Non-Competitive Class | | Attach nomination |
| N | Exempt Class | | Attach application (MSD-330) |
| T S | Labor Class | | Submit this form only |
| T | Resignation | | Attach application (MSD-330) |
| . Е | Retirement | | Submit signed resignation |
| R T M I | Deceased | | Give effective date |
| 10 | Removal | | Indicate date |
| N N A S | Layoff (Lack of Work or Funds) | | Attach copy of proceedings |
| | Military Leave of Absence | | Give facts under Remarks |
| | Other Leave of Absence | Process Transfer | Give facts under Remarks |
| О | Transfer | From: To: | Give facts under Remarks |
| T | Demotion | | Give facts under Remarks |
| H E | Suspension | | Give facts under Remarks |
| R | Reinstatement | | Give facts under Remarks |
| С | Change in Classification | | Give facts under Remarks |
| н | New Position | | Give facts under Remarks |
| A N | THEW TOSILION | 10/1/15 | Submt form MSD-222 |
| G | Change in Salary Change in Name | 10/1/10 | Indicate new saalry |
| E S | Other | | Give facts under Remarks |
| | e on back if necessary) | | Give facts under Remarks |
| 1% Contract increase effective 10/1/15 | | | mm/n/00/ |
| Ti | | Appointing Officer Title | Chief of Police |
| | | Address | |
| ··· -··· | | | |
| CERTIFI | | | |
| valid u | employment is in accordance with | Ву | |
| | Law and Rules made in pursuance | | |
| (Date | to law. Subject to any limitation or condition specified above. | Date | |
| | | | |

| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this c SUPPLEMENTARY PAYROLL CERTIFICATION | hange AND | DATE |
|--------------------------------|---|------------------------------------|---|
| | REPORT OF PERSONNEL CHANGE | | MONTH 04 DAY 01 YEAR 2015 |
| | Civil Service Commission | NAME OF EMPLOYEE: Bansner, Bria | |
| FROM: (Check City DEPARTMENT | County Town Village or District | ADDRESS: | |
| Police | Department | Lieutenant | SALARY: \$ 82,559 |
| NAME AND T | ITLE OF LAST EMPLOYEE IN POSITION: | Veteran | ☐ Non-Veteran |
| <u> </u> | | Disabled Ve | teran Exempt Volunteer Fireman |
| | | DATE OF BIRTH: | SOCIAL SECURITY NUMBER: |
| | Check Nature of Personnel Change | Date Effective | Action Necessary by Appointing Officer: |
| İ | Permarient | | Return report of Certification |
| <u> </u> | Provisional | | Attach application (MSD-330) |
| A P | Temporary . | From: To: | State length of employment |
| P | Substitute | From: To: | Give facts under Remarks |
| 0 | For Term of Office | From: To: | Give facts under Remarks |
| N | Permanent Promotion | | Return report of Certification |
| T M | Provisional Promotion | | Attach nomination |
| E | Non-Competitive Class | | Attach application (MSD-330) |
| N T | . Exempt Class | | Submit this form only |
| 5 | Labor Class | | |
| T | Resignation | | Attach application (MSD-330) |
| E | Retirement | | Submit signed resignation |
| R T M I | Deceased | | Give effective date |
| ΪO | Removal | | Indicate date |
| N N A S | F-1 | | Attach copy of proceedings |
| | Edgen (Edek of Froik of Parices) | | Give facts under Remarks |
| | TABLERY LEAVE OF ADSERCE | | Give facts under Remarks |
| 0 | - Osici scave of ribacice | From: To: | Give facts under Remarks |
| O T | Page 1 | | Give facts under Remarks |
| Н | Demotion | - | Give facts under Remarks |
| E R | Suspension | | Give facts under Remarks |
| | Reinstatement | <u> </u> | Give facts under Remarks |
| C H | Change in Classification | | Give facts under Remarks |
| Ā | New Position | | Submt form MSD-222 |
| N G | Change in Salary | 4/1/15 | Indicate new saalry |
| Ē | Change in Name | | Give facts under Remarks |
| <u>s</u> | Other | | Give facts under Remarks |
| 2% Con | tract increase effective 4/1/15 to to Lieutenant effective 1/7/2015 | Appointing Officer Title Address | Maller Chief of Police |
| CERTIFIE valid u | employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or | Ву | 1 |
| (Date | e) condition specified above. | Date | |

| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this char SUPPLEMENTARY PAYROLL CERTIFICATION AN REPORT OF PERSONNEL CHANGE | √D | MONTH 01 DAY 07 YEAR 2015 |
|-------------------|---|---------------------------------------|---|
| Utica C | ivil Service Commission | NAME OF EMPLOYEE: Bansner, Brian D |) |
| FROM: (Check o | | ADDRESS: | |
| ⋉ City | County Town Village or District | | |
| DEPARTMENT: | | TITLE OF POSITION: | SALARY: |
| | Department | Lieutenant | \$ 80,940 |
| NAME AND TIT | LE OF LAST EMPLOYEE IN POSITION: | ☐ Veteran | ☐ Non-Veteran |
| ļ | · · · · · · · · · · · · · · · · · · · | Disabled Veteran | Exempt Volunteer Fireman |
| | | DATE OF BIRTH: | SOCIAL SECURITY NUMBER: |
| | Check Nature of Personnel Change | Date Effective | Action Necessary by Appointing Officer: |
| ļ | Permanent | | Return report of Certification |
| | Provisional | | Attach application (MSD-330) |
| A P | ☐ Temporary | From: To: | State length of employment |
| P | Substitute | From: To: | Give facts under Remarks |
| 0 | For Term of Office | From: To: | Give facts under Remarks |
| N | Permanent Promotion | 1/7/2015 | Return report of Certification |
| T M | Provisional Promotion | | Attach nomination |
| Е | Non-Competitive Class | | Attach application (MSD-330) |
| N T | Exempt Class | | Submit this form only |
| s | Labor Class . | | Attach application (MSD-330) |
| Т | Resignation | | Submit signed resignation |
| ERT | Retirement | | Give effective date |
| МI | Deceased . | | Indicate date |
| N N | ☐ Removal | | Attach copy of proceedings |
| A S | Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| | Military Leave of Absence | | Give facts under Remarks |
| | Other Leave of Absence | From: To: | Give facts under Remarks |
| 0 | Transfer Transfer | | Give facts under Remarks |
| T | Demotion | | Give facts under Remarks |
| H E | ☐ Suspension | | Give facts under Remarks |
| R | Reinstatement | | Give facts under Remarks |
| с | Change in Classification | 1 | Give facts under Remarks |
| н | New Position | | Submt form MSD-222 |
| A N | Change in Salary | | Indicate new saalry |
| G | Change in Name | | Give facts under Remarks |
| E S | Other | | Give facts under Remarks |
| emarks: (Continue | on back if necessary) | · · · · · · · · · · · · · · · · · · · | Give facts under neturing |
| | | Appointing Officer | Mort Willias |
| | | Title | Chief of Police |
| CERTIFI | CATE This certifies that the above | | |
| valid u | art. | D., | 1 |
| Tund b | employment is in accordance with Law and Rules made in pursuance | Ву | |
| | to law. Subject to any limitation or | | ļ |
| (Date | | Date | |

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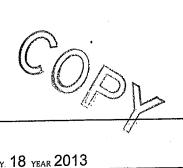
| | Report all personnel changes to this for | | DATE |
|---------------------|---|----------------------|---|
| | Send ONE COPY prior to payroll affected by the SUPPLEMENTARY PAYROLL CERTIFICATI REPORT OF PERSONNEL CHANGE | nis change ON AND | |
| TO: | KEI OKI OF I BIGOMIVE CHANGE | | MONTH 04 DAY 01 YEAR 2014 |
| | Civil Service Commission | NAME OF EMPLOYEE: | D |
| FROM: (Chec | konly one) | Bansner, Brid | an D |
| ⊠ Cit | | ADDRESS: | |
| DEPARTMEN | | TITLE OF POSITION: | |
| Police | Department | Sergeant | SALARY: \$ 72,853 |
| | TITLE OF LAST EMPLOYEE IN POSITION: | | □ Non-Veleran |
| | | Veteran Disabled \ | |
| | | DATE OF BIRTH: | SOCIAL SECURITY NUMBER: |
| | | | |
| | Clieck Nature of Personnel Change | Date Effective | Addis No. |
| ···· | Permanent | Dute Differior | Action Necessary by Appointing Officer: |
| | Provisional | | Return report of Certification |
| Α | Temporary | | Attach application (MSD-330) |
| P P | | . From: To: | State length of employment |
| ó | | From: To: | Give facts under Remarks |
| l | - 101 Italia o Once | From: To: | Give facts under Remarks |
| N T | Permanent Promotion | | Return report of Certification |
| M | Provisional Promotion | | Attach nomination |
| E N | Non-Competitive Class | 1 | Attach application (MSD-330) |
| T | Exempt Class | | Submit this form only |
| S | Labor Class | | Attach application (MSD-330) |
| T | Resignation | | Submit signed resignation |
| E R T | Retirement | | Give effective date |
| ΜÍ | Deceased Deceased | | Indicate date |
| 10 | Removal | | |
| N N A S | Layoff (Lack of Work or Funds) | · | Attach copy of proceedings |
| | Military Leave of Absence | | Give facts under Remarks |
| | Other Leave of Absence | | Give facts under Remarks |
| 0 | Transfer | From: To: | Give facts under Remarks |
| T | | | Give facts under Remarks |
| Н | | | Give facts under Remarks |
| E R | | | Give facts under Remarks |
| _ | Reinstatement | | Give facts under Remarks |
| C H | Change in Classification | | Give facts under Remarks |
| A | New Position | | Submt form MSD-222 |
| N G | Change in Salary | 4/1/14 | Indicate new saairy |
| E | Change in Name | | Give facts under Remarks |
| S | Other | | Give facts under Remarks |
| | on back if necessary) Increase effective 04/01/14 | Appointing Officer | Marin |
| | | Title | Chief of Police |
| | | Address . | |
| CERTIFIC valid u | | Ву | |
| (Date | | Date | |
| | • | | j. |

| TO: | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this SUPPLEMENTARY PAYROLL CERTIFICATION REPORT OF PERSONNEL CHANGE | change I AND | MONTH 12 DAY 18 YEAR 2013 |
|----------------------|--|---------------------------------|--|
| | Civil Service Commission | NAME OF EMPLOYEE: Bansner, Bria | |
| ⊠ Ci | ity County Town Village or District | ADDRESS: | |
| Police | Department | TITLE OF POSITION: Sergeant | SALARY: |
| NAME AND | TITLE OF LAST EMPLOYEE IN POSITION: | Veteran | \$ 71,425. |
| | | ☐ Disabled Ve | |
| | | DATE OF BIRTH: | SOCIAL SECURITY NUMBER- |
| | Clark Malayar CD | | |
| | Clieck Nature of Personnel Change | Date Effective | Action Necessary by Appointing Officer: |
| | Permanent Provisional | | Return report of Certification |
| Α | Temporary | | Attach application (MSD-330) |
| P P | Substitute | From: To: | State length of employment |
| Ō | For Term of Office | From: To: | Give facts under Remarks |
| I N | Permanent Promotion | From: To: | Give facts under Remarks |
| T | Provisional Promotion | | Return report of Certification |
| M E | 1 to visional 1 for oddon | | Attach nomination |
| N | TVORT-COMPERITIVE Class | | Attach application (MSD-330) |
| T S | Exempt Class Labor Class | | Submit this form only |
| T | Capor Class | | Attach application (MSD-330) |
| E | | | Submit signed resignation |
| R T M I | Retirement | | Give effective date |
| 10 | - Deceased | ļ | Indicate date |
| N N A S | Removal | <u> </u> | Attach copy of proceedings |
| | Layon (cack of vvork or runds) | <u> </u> | Give facts under Remarks |
| | and the state of Absence | | Give facts under Remarks |
| | The state of the s | From: To: | Give facts under Remarks |
| O T | | <u> </u> | Give facts under Remarks |
| н | Demotion | <u> </u> | Give facts under Remarks |
| E R | Suspension Reinstatement | | Give facts under Remarks |
| | - New State Metric | | Give facts under Remarks |
| Н | — Charge in Classification | | Give facts under Remarks |
| A. | TREW I OSIGOII | | Submt form MSD-222 |
| N G | Change in Salary | | Indicate new saalry |
| E | Change in Name | | Give facts under Remarks |
| S Continue | Other on back if necessary) | | Give facts under Remarks |
| | Increase effective 04/01/13 | | |
| | • | Appointing Officer | Chief of Police |
| | | Address | ZI Z |
| CERTIFIC valid un | THE COLUMN THE COUNTY | y | |
| (Date) | to law. Subject to any limitation or condition specified above. Dr | ate | |

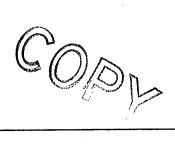
į



Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND MONTH 09 DAY 17 YEAR 2013 REPORT OF PERSONNEL CHANGE NAME OF EMPLOYEE: Bansner, Brian D. **Utica Civil Service Commission** FROM: (Check only one) ☐ Village or District X City County Town TITLE OF POSITION: SALARY: DEPARTMENT: \$ 64,950.00 Sergeant Police Department Non-Veteran NAME AND TITLE OF LAST EMPLOYEE IN POSITION: Exempt Volunteer Fireman Disabled Veteran SOCIAL SECURITY NUMBER: DATE OF BIRTH: Date Effective Action Necessary by Appointing Officer: Check Nature of Personnel Change Return report of Certification Permanent Attach application (MSD-330) Provisional State length of employment To: APPOINTMENT Temporary Give facts under Remarks To: From: Substitute Give facts under Remarks To: For Term of Office Return report of Certification × Permanent Promotion Attach nomination Provisional Promotion Attach application (MSD-330) Non-Competitive Class Submit this form only Exempt Class Attach application (MSD-330) Labor Class Submit signed resignation Resignation Give effective date Retirement RT Indicate date Deceased 10 Attach copy of proceedings Removal NN Give facts under Remarks Layoff (Lack of Work or Funds) A S Give facts under Remarks Military Leave of Absence Give facts under Remarks From: Other Leave of Absence Give facts under Remarks Tṛansfer Give facts under Remarks Demotion Give facts under Remarks Suspension Reinstatement Give facts under Remarks Give facts under Remarks Change in Classification Submt form MSD-222 New Position Indicate new saalry Change in Salary Give facts under Remarks Change in Name Give facts under Remarks Other Remarks: (Continue on back if necessary) Promoted to Sergeant effective 9/20/13 Appointing Officer Title Address This certifies that the above CERTIFICATE valid until employment is in accordance with Ву Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. Date (Date)



| | | Send ONE COP' SUPPLEMENTA | II personnel changes to this form Y prior to payroll affected by this o ARY PAYROLL CERTIFICATION RT OF PERSONNEL CHANGE | AND . | | MONTH 06 DAY: 18 YEAR 2 | 2013 |
|-----------------|---------------------------------------|------------------------------|---|-------------------|---|--------------------------------|---------------------|
| TO: | | ^ . | _ • | NAME OF EM | | | • |
| | vil Service | Commis | sion | ADDRESS: | er, Brian | | |
| FROM: (Check on | | ГП т | Village or District | ADDRESS: | | | • |
| X City | County | Town | Village of District | TITLE OF POS | ITION: | SALARY: | |
| POLICE D | epartment | | | Police | Officer | s 56,775. | |
| NAME AND TITL | E OF LAST EMPLO | YEE IN POSITION | : · · | | Veteran | ☐ Non-Veteran | |
| | | • | | | Disabled Veteran | Exempt Volunteer Fireman | |
| | | | | DATE OF BIRT | Ή: | SOCIAL SECURITY NUMBER | |
| | | | | | | | A single-Officer |
| | | Check Nature of | Personnel Change | <u>Da</u> | te Effective | Action Necessary by | Appointing Officer; |
| | Perman | ent | | | | Return report of Certification | |
| | Provision | onal | | | | Attach application (MSD-330) | |
| A P | ☐ Tempor | ary | | From: | To: | State length of employment | |
| P | ☐ Substitu | ıte | | From: | To: | Give facts under Remarks | · |
| 0 | For Terr | m of Office | | From: | То: | Give facts under Remarks | |
| N | Perman | ent Promotion | | | | Return report of Certification | |
| . Т | Provisio | nal Promotion | <u> </u> | | | Attach nomination | |
| M E | ☐ Non-Co | mpetitive Class | | • | | Attach application (MSD-330) | |
| N T | ☐ Exempt | Class | | | | Submit this form only | <u></u> |
| s | Labor C | lass | · | | | Attach application (MSD-330) | |
| Т | Resigna | tion | | | | Submit signed resignation | |
| E D. T. | Retirement | | | | | Give effective date | |
| RT MI. | Deceased | | | | | Indicate date | |
| I O N N | Remova | Removal | | | · · · · · · · · · · · · · · · · · · · | Attach copy of proceedings | |
| A Ş | Layoff (| Lack of Work or Fi | unds) | | | Give facts under Remarks | |
| | ☐ Military | Leave of Absence | | | a trans apparer with the state of the state | Give facts under Remarks | |
| | Other Le | eave of Absence | | From: | To: | Give facts under Remarks | |
| . o | ☐ Transfer | | | | | Give facts under Remarks | |
| T | Demotio | n | | | <u></u> | Give facts under Remarks | |
| H E | Suspens | ion | · | | | Give facts under Remarks | |
| R | Reinstate | ement | | | | Give facts under Remarks | |
| . с | Change | in Classification | | | | Give facts under Remarks | |
| H | New Pos | ition | | | | Submt form MSD-222 | |
| A N | Change | in Salary | | | | Indicate new saalry | |
| G E | Change i | in Name | | | | Give facts under Remarks | |
| 5 | ☐ Other | | | | | Give facts under Remarks | |
| | e on back if necessary ty increase | | e 6/16/13 | A mainting Office | ·or | Month | On |
| | | | | Appointing Office | | Chief of Police | |
| | | | | Title | | Chief of Police | |
| | | | | Address | | | |
| CERTII valid | | employ | s certifies that the above ment is in accordance with d Rules made in pursuance | Ву | | | |
| | | | Subject to any limitation or | | | | |
| (Da | ate) | | ndition specified above. | Date | | | |



| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this chang SUPPLEMENTARY PAYROLL CERTIFICATION ANI REPORT OF PERSONNEL CHANGE |) · | DATE MONTH 06 DAY 21 YEAR 2012 |
|-----------------|--|---------------------------------------|---|
| Utica Ci | vil Service Commission | NAME OF EMPLOYEE: Bansner, Brian | |
| FROM: (Check or | | ADDRESS: | |
| DEPARTMENT: | Department | TITLE OF POSITION: Police Officer | SALARY: \$ 51,451. |
| | LE 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: |
| | Permanent | | Return report of Certification |
| į | Provisional | | Attach application (MSD-330) |
| A | Temporary | From: To: | State length of employment |
| P | Substitute | From: To: | Give facts under Remarks |
| ò | For Term of Office | From: To: | Give facts under Remarks |
| I N | Permanent Promotion | | Return report of Certification |
| T | Provisional Promotion | | Attach nomination |
| М | | | Attach application (MSD-330) |
| E N | | · · · · · · · · · · · · · · · · · · · | Submit this form only |
| T | | | Attach application (MSD-330) |
| 5 | | | Submit signed resignation |
| T E | | | Give effective date |
| RT | Retirement | | Indicate date |
| M 1 I O | Deceased | | Attach copy of proceedings |
| NN. | Removal | | Give facts under Remarks |
| A S | Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| | Military Leave of Absence | | |
| | Other Leave of Absence | From: To: | Give facts under Remarks |
| O . T | Transfer | | Give facts under Remarks |
| H , | Demotion | | Give facts under Remarks |
| E | Suspension | | Give facts under Remarks |
| R | Reinstatement . | | Give facts under Remarks |
| C _. | Change in Classification | | Give facts under Remarks |
| H A | New Position | | Submt form MSD-222 |
| N | Change in Salary | | Indicate new saalry |
| G E | Change in Name | | Give facts under Remarks |
| S | Other Other | | Give facts under Remarks |
| | | | mondal |
| | | Appointing Officer Title | Ohiof of Dollar |
| | | | Chief of Police |
| | | Address - | |
| CERTIF | | | |
| valid | until employment is in accordance with Law and Rules made in pursuance | Ву | |
| | to law. Subject to any limitation or | | 1 |
| (Dai | | Date | |
| • | | | |

| Report all personnel changes to this form: Send ONE COPY prior to payroll affected by this che SUPPLEMENTARY PAYROLL CERTIFICATION A REPORT OF PERSONNEL CHANGE. FROM (Check only one). | nge VD | NTH, 06, DAY 02, VEAR 2011 |
|--|--|--|
| City County Town Village or District DEPARTMENT) POlice Department NAME AND TITLE OF LAST EMPLOYEE IN POSITION Citex Nature of Personnel Change | | SALARY: \$493.15. |
| Permanent in Provisional Temporary P. Substitute C. To' Term of Office Remanisti Promotion Remanisti Promotion Substitute To' Term of Office To' Term of Office | Atlate A | Actor Necessary by Appointing Officer Improport of Certufication th application (MSD-330) Length of employment facts under Remarks tasts under Remarks In report of Certufication |
| M E Non-Competitive Class 1: Exempt Class T Exempt Class T FRESIGNATION FROM Returnment M Signation FROM M Signation FROM FR | Attac Subm Attac Subm Attac Subm Indica | h-riomination: Lapplication (MSD-330) 2 2 2 2 2 2 2 2 2 |
| N N S Carboval Carbov | Give fi From: To Give fi Give fi Give fi Give fi Give fi Give fi | Copy of proceedings acts under Remarks |
| C is Change in Classification New Position New Position C S SChange in Salary C S S Other. Comarks: (Continue on back if necessary) | Give fa Submi 6/16/2011 Indicat Give fa | cts under Remarks cts under Remarks form MSD-222 e new sealry cts under Remarks cts under Remarks |
| Longevity increase effective 6/16/11 | Appointing Officer Title Address | Manual International Internati |
| CERTIFICATE This certifies that the above valid until employment is in accordance with Law and Rules made in pursuance to law Subject to any limitation or COale) Condition specified above | By Coste | |

| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this c SUPPLEMENTARY PAYROLL CERTIFICATION REPORT OF PERSONNEL CHANGE | AND | MONTH 10 DAY 13 YEAR 2010 |
|---|---|--|--|
| | ivil Service Commission | NAME OF EMPLOYEE: Bansner, Brian | |
| FROM: (Check of | | ADDRESS: | |
| DEPARTMENT | | TITLE OF POSITION: | SALARY: |
| Police L | Department | Police Officer | s 47,056. |
| NAME AND TH | TLE OF LAST EMPLOYEE IN POSITION: | Veleran | ☐ Non-Veteran |
| | | DATE OF BIRTH: | an Exempt Volunteer Fireman SOCIAL SECURITY NUMBER: |
| | • | DATE OF BIRTH. | SOUTH SECONT A NOW DEAL. |
| | Check Nature of Personnel Change | Date Effective | Action Necessary by Appointing Officer: |
| , | Permanent · | | Return report of Certification |
| | Provisional | | Attach application (MSD-330) |
| A P | ☐ Temporary | From: To: | State length of employment |
| P | Substitute | From: To: | Give facts under Remarks |
| O I | For Term of Office | From: To: | Give facts under Remarks |
| N | Permanent Promotion | | Return report of Certification |
| T M | Provisional Promotion | | Attach nomination |
| E | Non-Competitive Class | | Attach application (MSD-330) |
| N T | Exempt Class | | Submit this form only |
| s | Labor Class | | Attach application (MSD-330) |
| T | Resignation | | Submit signed resignation |
| E R T | Retirement | | Give effective date |
| MI | ☐ Deceased | | Indicate date |
| I O N N | Removal | | Attach copy of proceedings |
| ` A S | Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| • | Military Leave of Absence | | Give facts under Remarks |
| | Other Leave of Absence | From: To: | Give facts under Remarks |
| Ö | Transfer | | Give facts under Remarks |
| T | Demotion Demotion | | Give facts under Remarks |
| H E | Suspension | | Give facts under Remarks |
| R | Reinstatement | | Give facts under Remarks |
| С | Change in Classification | | Give facts under Remarks |
| н | New Position | | Submt form MSD-222 |
| A N | ☐ Change in Salary | | Indicate new saalry |
| Ğ | Change in Name | | Give facts under Remarks |
| E S | X Other | 10/13/10 | Give facts under Remarks |
| marks: (Continue | e on back if necessary) | Appointing Officer Title Address | Mark W. William Chief of Police |
| CERTIFI valid t | employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or | By | |
| | | | |

| | Report all personnel changes to this form Send ONE COPY prior to payroll affected by this chan SUPPLEMENTARY PAYROLL CERTIFICATION AN REPORT OF PERSONNEL CHANGE | D | MONTH 06 DAY 24 YEAR 2010 | |
|-----------------|---|--|---|--|
| TO: | ivil Service Commission | NAME OF EMPLOYEE: Banser, Brian | | |
| FROM: (Check of | | ADDRESS: | <u> </u> | |
| X City | County Town Village or District | | | |
| DEPARTMENT: | | TITLE OF POSITION: | SALARY: | |
| Police D | Department | Police Officer | \$ 47056. | |
| NAME AND TIT | LE 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: | |
| ļ | Permanent | Date affection | Return report of Certification | |
| ł | Provisional | - | | |
| A | | Parent Tai | Attach application (MSD-330) | |
| P | Temporary Substitute | From: To: | State length of employment | |
| o | For Term of Office | | Give facts under Remarks | |
| I N | | From: To: | Give facts under Remarks | |
| T | | | Return report of Certification | |
| M E | | | Attach nomination | |
| N B | - Troit Competence Claus | | Attach application (MSD-330) | |
| T | part . | | Submit this form only | |
| S | | | Attach application (MSD-330) | |
| T E | | | Submit signed resignation | |
| RT | Retirement | | Give effective date | |
| M I I O | Deceased Removal | <u> </u> | Indicate date | |
| NN | | | Attach copy of proceedings | |
| A S | | | Give facts under Remarks | |
| | | | Give facts under Remarks | |
| | Other Leave of Absence | | Give facts under Remarks | |
| O | Transfer | | Give facts under Remarks | |
| н | Demotion | | Give facts under Remarks | |
| E R | Suspension | | Give facts under Remarks | |
| | Reinstatement | | Give facts under Remarks | |
| C H | Change in Classification | [| Give facts under Remarks | |
| A | New Position | | Submt form MSD-222 | |
| N G | Change in Salary | | Indicate new saalry | |
| E | Change in Name | | Give facts under Remarks | |
| S Continu | U Other | | Give facts under Remarks | |
| | e on back if necessary) | • | | |
| Longevi | ty increase effective 6/16/2010 | | į | |
| | | | Mark H. William | |
| | · | Appointing Officer | lark of Million | |
| | | | Chief of Police | |
| | | Address | Office of Folioc | |
| | | - | | |
| | | | | |
| CERTIF | | | | |
| valid (| employalents at accordance with | Ву | | |
| • | Law and Rules made in pursuance to law. Subject to any limitation or | | | |
| (Dat | • • • • | Date | · | |
| , | *************************************** | ••••• | | |

Report all personnel chariges on this form

Send ONE COFT prior to payroll affected by this change

| M | DATE 6/12/09 NONTH DAY YEAR |
|---|-----------------------------|
|---|-----------------------------|

| SUPPLEMENTARY PAYROLL CERTIFIC REPORT OF PERSONNEL CHAI | | MONTH DAY YEAR |
|--|---|--|
| TO: Utics Civil Service Commission | NAME OF EMPLOYEE. | SECRETARY OF THE PROPERTY OF T |
| FROM: (Check only one) Clty Clty County Clty ODDEROS. | |
| DEPARTMENT: Police Department NAME AND THE OF LAST EMPLOYEE BY POSITION | TITLE OF POSITION: PALICE OFFIC | The SAME TO SECURE A SECURE OF THE CONTROL OF THE SECURE O |
| NAMES AND TITLE OF LAST EMPTOYEE IN POSITION | Q Veterre, G Disabled Veterre | O Non-Vetran C Exempt Volunteer Fireman |
| | DATE OF BIRTH | SOCIAL SEGURITY NUMBER |
| <u>Charle Nature of Perceival Charge</u> | <u>Dak Effectue</u> | Action Naturery by Appainting Officer Return report of Certifications |
| A D Provisional P D Temporary | | Attach application: (MSD-330) |
| P C C Substitute | From: To: | State length of employment Give facts under Remarks |
| N C Permanent Promotion | From: To: | Give faces under Remarks Return report of Certification |
| M C Provisional Fromotion | | Attach nomination |
| N Non-Competitive Class N C Exempt Class | | Attach application (MSD-330) Submit this form only |
| 5 D Labor Class TA C Resignation | PART TO THE PARTY OF THE PARTY | Attach application (MSD-330) Submit signat resignation |
| B T O Retrement | | Crive effective date |
| M C | | Indicate date Attach copy of proceedings |
| N S 0 Layoff (Lack of Work or Funds) O Military Lexve of Absence | | Give facts under Remarks Give facts under Remarks |
| T Cuber Lauve of Absence | From: To: | Give facts under Remarks |
| H | | Give facts under Remarks Give facts under Remarks |
| Supersion Reinstatement | | Grve facts under Remarks |
| C H Charge in Classification | | Give facts under Remarks Give facts under Remarks |
| A Change in Salary G | 6/16/09 | Submit form MSD-222 Indicate new salary |
| E G Chiage in Name S G Other | | Give facts under Remarks |
| marks: (Continue on back if necessary) | | Give facts under Remarks |
| LONGENE LINDERSE | | |
| LONGEVITY INCREASE ÉFFECTIVE 6/16/09 | Appointing Officer Title Ohief | |
| EFFECTIVE 6/16/01 | Title Uniet Address | of Police |
| CERTIFICATE This certifies that the above | | |
| valid until Employment is in accordance with | В7 | |
| Law and Rules made in pursuance to Law. Subject to any limitation or | | |
| (Dete) Condition specified above. | 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 Narcotics - UPD

Pursuant to the authority vested in me by Section 654 of the County Law, I hereby Deputize: Brian Basner: Lieutenant; 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.

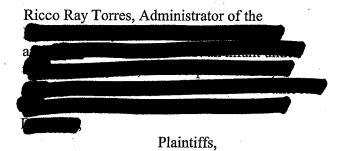
I set my hand and seal this 14th day of January, 2020.

Robert M. Maciol

Oneida County Sheriff

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF NEW YORK

PARTIAL JUDGMENT IN A CIVIL CASE



VS.

CASE NUMBER: 6:16-CV-0439 DNH -TWD

Officer James W. Graeff, Officer Jacob Penree, Officer Dzevad Bajrektarevic, Lt. Brian Banser, Officer Serif Seferagic, Officer Maynard Anken, and Sgt. John Able,

Defendants.

Decision by Court.

IT IS ORDERED AND ADJUDGED: Pursuant to the Summary Order of the Hon. David N. Hurd, USDJ dated November 13, 2017, a partial Judgment is entered in favor of the following defendants: Officer James W. Graeff, Officer Jacob Penree, Officer Dzevad Bajrektarevic, Lt. Brian Banser, Officer Serif Seferagic, Officer Maynard Anken, and Sgt. John Able and against plaintiffs.

DATED: November 13, 2017

ENTERED: 11/13/2017

Clerk of Court

-5-

P.T. McBrearty Deputy Clerk





Undersheriff Joseph Lisi Chief Deputy Jonathan Owens **Chief Deputy Gregory Pflieger**

Sheriff Robert M. Maciol Law Enforcement Member Deputation For Narcotics Enforcement

Pursuant to the authority vested in me by Section 654 of the County Law, I hereby

Deputize: Lt. Brian Basner: 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 October 9th, 2018 and shall expire October 9th, 2019.

I set my hand and seal this 9th day of October, 2018.

Robert M. Maciol
Oneida County Sheriff

Voice (315) 736-0141 Fax (315) 736-7946 6075 Judd Road Oriskany, NY 13424 Voice (315) 768-7804 Fax (315) 765-2327

Civil Division

UTICA POLICE DEPARTMENT

Personnel Order



| Issue date: 04/14/2020 | Subject: Assignment / Transfer Orders | P.O. 20-18 |
|-----------------------------------|--|------------|
| Issuing Authority DC Ed Noonan | Approved by: Chief M. Williams | |

Captain Brian Bansner

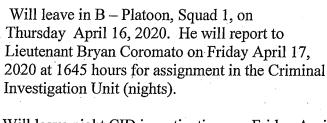
Will leave the Patrol division at the completion of his tour on Weds. April 15, 2020. He will report to Deputy Chief Ed Noonan on Thursday, April 16, 2020 at 0645hrs for assignment in the Administrative Division.

Will leave the Criminal Investigative Division at the completion of his tour on Weds. April 15, 2020. He will report to Deputy Chief Ed Noonan on Thursday, April 16, 2020 for assignment in the Uniformed Patrol Division.

Will leave C – Platoon, Squad 3 at the completion of his tour on Friday, April 17, 2020. He will report to Capt. Bansner on Monday April 20, 2020 at 0745 hours for assignment as the Patrol Support Lieutenant.

Will leave A – Platoon, Squad 2 at the completion of his tour on Sunday April 19, 2020. He will report to Capt. Bansner on Tuesday, April 20, 2020 for assignment in C platoon – Squad 3 as the Platoon Commander.

Will leave the Criminal Investigative Division at the completion of his tour on Friday, April 17, 2020. He will report to Capt. Bansner on Monday, April 20, 2020 at 0000 hours for assignment in A – Platoon, Squad 2.



Will leave night CID investigations on Friday April 17, 2020. He will report to Lieutenant Bryan Coromato on Monday April 20, 2020 at 0845 hours for assignment in the Criminal Investigation Unit (days).

Will leave A Platoon Squad 1 at the completion of his RDO on Friday, April 17, 2020. He will report to Capt. Kelly on Monday April 20, 2020 for assignment in the Criminal Investigation Unit (SIU).

Will leave the Criminal Investigative Division at the completion of his tour on April 24, 2020. He will report to Lt. Howard Brodt on Sunday April 26, 2020 for training in C Platoon Squad 3.

UTICA POLICE DEPARTMENT

Personnel Order



| Issue date: 04/08/201 | Subject: Assignment / Transfer Orders | P.O. 15-11 |
|-----------------------|--|------------|
| Issuing Authority | Approved by: Chief M. Williams | · |

Lt. Brian Bansner

Will leave A Platoon Squad 1 on Monday April 13th, 2015 at 23:59 hours and will report to Captain Ed Noonan at 18:45 hours on Tuesday April 14th, 2015 for assignment in the Tactical Unit.

Will leave C Platoon Squad 3 on Monday April 13th, 2015 at 23:59 hours and will report to Lt. Brian Bansner at 18:45 hours on Tuesday April 14th, 2015 for assignment in the Tactical Unit. He will be granted a RDO on Monday April 13th, 2015.

Will leave B Platoon Squad 1 on Monday April 13th, 2015 at 23:59 hours and will report to Lt. Don Cinque at 15:45 hours on Tuesday April 14th, 2015 for assignment in C Platoon Squad 3.

Will leave C Platoon Squad 3 on Monday April 13th, 2015 at 23:59 hours and will report to Lt. Brian Bansner at 18:45 hours on Tuesday April 14th, 2015 for assignment in the Tactical Unit. He will be granted a RDO on Monday April 13th, 2015.

Will leave C Platoon Squad 2 on Monday April 13th, 2015 at 23:59 hours and will report to Lt. Brian Bansner at 18:45 hours on Tuesday April 14th, 2015 for assignment in the Tactical Unit. He will be granted a RDO on Monday April 13th, 2015.

Will leave B Platoon Squad 2 on Sunday April 12th, 2015 at 23:59 hours and will report to Lt. Don Cinque at 15:45 hours on Monday April 13th, 2015 for assignment in C Platoon Squad 3.

Will leave C Platoon Squad 1 on Tuesday April 14th, 2015 at 23:59 hours and will report to Lt. Don Cinque at 15:45 hours on Wednesday April 15th, 2015 for assignment in C Platoon Squad 2.

Will leave C Platoon Squad 3 on Monday April 13th, 2015 at 23:59 hours and will report to Lt. Brian Bansner at 18:45 hours on Tuesday April 14th, 2015 for assignment in the Tactical Unit. He will be granted a RDO on Monday April 13th, 2015.

Will leave A Platoon Squad 1 on Monday April 13th, 2015 at 23:59 hours and will report to Lt. Brian Bansner at 18:45 hours on Tuesday April 14th, 2015 for assignment in the Tactical Unit.

Will leave A Platoon Squad 3 on Thursday April 16th, 2015 at 23:59 hours and will report to Lt. Don Cinque at 15:54 hours on Friday April 17th, 2015 for assignment in C Platoon Squad 3.

Will leave C Platoon Squad 1 on Tuesday April 14th, 2015 at 23:59 hours and will report to Lt. Don Cinque at 15:45 hours on Wednesday April 15th, 2015 for assignment in C Platoon Squad 2.

Will leave B Platoon Squad 2 on Sunday April 12th, 2015 at 23:59 hours and will report to Lt. Don Cinque at 15:45 hours on Monday April 13th, 2015 for assignment in C Platoon Squad 2.

Will leave A Platoon Squad 2 on Monday April 13th, 2015 at 23:59 hours and will report to Lt. Brian Bansner at 23:45 hours on Tuesday April 14th, 2015 for assignment in A Platoon Squad 1.

Will leave C Platoon Squad 2 on Tuesday April 14th, 2015 at 23:59 hours and will report to Lt. Charles Kelly at 07:45 hours on Wednesday April 15th, 2015 for assignment in B Platoon Squad 1. He will be granted a RDO on Tuesday Ay April 14th, 2015.

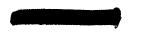
Captain Edward Noonan
Uniformed Patrol Division

UTICA POLICE DEPARTMENT

Personnel Order



| Issue date: 01/07/15 | Subject: Assignment / Transfer Orders | P.O. 15-1 | |
|--------------------------------------|--|-----------|--|
| Issuing Authority Capt. E. Noonan | Approved by: Chief M. Williams | | |



Lt. Brian Bansner

Will leave B Platoon Squad 1 on Sunday January 11th, 2015 at 23:59 hours and will report to Captain Michael Zdanowicz at 12:45 hours on Monday January 12th, 2015 for assignment in CID Nights.

Will leave A Platoon Squad 1 on Friday January 9th, 2015 at 23:59 hours and will report to Captain Edward Noonan at 07:45 hours on Saturday January 10th, 2015 for assignment in B Platoon Squad 1.

Will leave B Platoon Squad 3 on Friday January 9th, 2015 at 23:59 hours and will report to Captain Edward Noonan at 23:45 hours on Saturday January 10th, 2015 for assignment in A Platoon Squad 1.

Captain Edward Neonan Uniformed Patrol Division

UTICA POLICE DEPARTMENT

Personnel Order



| Issue date: 10/07/2014 | Subject: Assignment / Transfer Orders | P.O. 14-41 | |
|--------------------------------------|--|------------|--|
| Issuing Authority Capt. E. Noonan | Approved by: Chief M. Williams | | |

Will leave A Platoon Squad 3 at 23:59 hours on Tuesday October 14th, 2014 and will report to Lieutenant Don Cinque at 15:45 hours on Wednesday October 15th, 2014 for assignment in C Platoon Squad 2. Sgt. Rios will be granted an RDO on Tuesday October 14th, 2014.

Sgt. Brian Bansner

Will leave C Platoon Squad 2 at 23:59 hours on Tuesday October 14th, 2014 and will report to Lieutenant Steve Hauck at 07:45 hours on Wednesday October 15th, 2014 for assignment in B Platoon Squad 3.

Captain Edward I onan Uniformed Patrol Division

Personnel Order



| Issue date: 09/20/13 | Subject: Assignment / Transfer Orders | P.O. 13 - 26 |
|------------------------------------|--|--------------|
| Issuing Authority D/C J. Toomey | Approved by: Chief M. Williams | |

Sergeant Brian Bansner

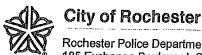
Will leave the Special Operations Division on 09/27/13 at 16:00 and report to Captain Watson on 09/30/13 at 15:45 hours for assignment in Platoon C, Squad 2.

puty Chief John Toome, perations Bureau Chief

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

| SECTION I-REGISTRANT INF | | registrant) | Control Consults Number | | | |
|--|--|--|--|--|--|--|
| Last Name | First Name | All Date of Birth | Gender Social Security Number* | | | |
| BANSNER | BRIAN | u., | | | | |
| Home Residence Mailing Address | City State Zin | | to a contract casting in (4) | | | |
| Home Residence Street Address (if Differen | nt) City, State, Zip | · · · · · · · · · · · · · · · · · · · | City, State, Country of birth (if other than U.S.) | | | |
| I am the person named above. I understan | d that the information in Section I is part o | f a written statement that will be p | resented to the Division of Criminal Justice Services for | | | |
| | of my knowledge and belief. | | Date | | | |
| Signature | | | | | | |
| *Pursua. New Yen: Shee Personer Pring the Clion 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 INFORM | IATION (To be completed by the chie | of law enforcement officer) | ille of Person Signing Section II | | | |
| LaBella | Daniel | N. A | Acting Chief of Police | | | |
| Name of Law Enforcement Agency | Daniel | 1 10 17 | Telephone | | | |
| City of Utica Police | Department | | | | | |
| Address | | City, State, ZIP | | | | |
| 413 Oriskany St. We | st | Utica, New | YORK 13502 Fingerprints submitted to DCJS | | | |
| Type of Appointment Full-time Part-time | Background Check Conducted Yes No | Residency Verified X Yes No | X Yes No | | | |
| 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 pursuent to §209-q of the General Municipal Law. | | | | | | |
| Signature | | , | 06-16-08 | | | |
| | | | and the state of t | | | |
| SECTION III—CIVIL SERVICE IN | First Name | ne civil service officer for all r | egistrants Full of Fart-lime) e of Person Signing Section III | | | |
| Wrobel | Lori | A | Executive Secretary | | | |
| Name of Civil Service or Personnel Agency City of Utica Civil | Service | | Telephone (315) 792-0226 79 2-0227 | | | |
| Address | | City, State, ZIP | | | | |
| 1 Kennedy Plaza | Λ. | Utica, New | Utica, New York 13502 | | | |
| Title and Civil Service Classification of the Re | egistrant D D D D D D D D D D D D D D D D D D D | | | | | |
| Police Officer | LUMPETITIVE | | for the Coation II A understand | | | |
| I am the civil service officer responsible for ce that the information in Section III is part of a w of my knowledge and belief. | ntifying the appointment of individuals app vritten statement that will be presented to t | earing on the payroll of the law er the Division of Criminal Justice Se | nforcement agency named in Section II. I understand ervices for filing, and I certify that it is true to the best | | | |
| Signature Ob - N 1/0 | o ni l | | 06-16-08 | | | |
| MUM H. WIL | 1) V/(\lambda | | 100 10 00 | | | |
| SECTION IV-OATH OF OFFICE | (To be completed by the registrar re | sponsible for recording oaths | of office) | | | |
| Last Name Brenon | First Name Joan | M. Thi | e of Person Signing Section IV City Clerk | | | |
| Name of Recording Office City of Utica | <u></u> | | Telephone (315) 792-0113 | | | |
| Address 1 Kennedy Plaza | | City, State, ZIP Utica, New | York 13502 | | | |
| Oath of Office Date Oath of Office Title of the Registrant | | | | | | |
| F | Police Officer | | | | | |
| I am the officer responsible for recording the ceths 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 | nd Dien | | Date 6-14-08 | | | |





Rochester Police Department 185 Exchange Boulevard, Suite 630 Rochester, New York 14614-2124 www.cityofrochester.gov/publicsafety/police/

August 30, 2018

Chief Mark Williams Utica Police Department 413 Oriskany St.-West Utica, NY 13502

Dear Chief Williams,

I would like to thank you and your department for the assistance provided to members of the Rochester Police Department during the month of August 2018. The Rochester Police Department's Major Crimes Unit (MCU) and Special Investigations Section (SIS) were investigating a group who were involved in narcotics sales, and who were suspected in several violent crimes in the City of Rochester. During our investigation, Utica, NY was identified as a source for narcotics distribution, and it had relevance to our case. A search warrant was obtained for d with the help of Lieutenant Brian Bansner, SWAT entry was arranged and additional resources were obtained.

On August 14, 2018, several investigators and supervisors from the Rochester Police Department met up with Utica PD and Metro SWAT personnel and the search warrant was Quantities of heroin, cocaine, marijuana and cash were recovered and the target, Clifford Billins was taken into custody. The cooperation and professionalism demonstrated by the members of your agency and the SWAT Team was exceptional and with their help, our case was significantly strengthened. I would like to extend my sincere thanks and gratitude to the Utica Police Department and the Metro SWAT Team; specifically the following individuals:

Special Investigations Unit

Lt. Brian Bansner

Sqt. Michael Murphy

Inv. David Desens

Inv. Paul Paladino

Inv. Joe Dare

Metro SWAT Team

Capt. Don Cinque Lt. James Holt

Officer Sean Flanagan

Officer Tyler Mowers

Officer Chris Mower

Officer James Femia

Tactical Unit

Officer Castilla/K9 "Varick"

Respectfully,

Chief Michael L. Ciminelli Rochester Police Department

xc: Captain John Koonmen

Phone: 585.428.7033

Fax: 585.428.6093

TTY: 585.428.6054

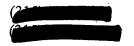
EEO/ADA Employer



CITY OF UTICA// OF PUBLIC SAFETY VODE 13502

413 Oriskany Street West, Utica, New York 13502

Fax



ROBERT PALMIERI Mayor

Mark W. Williams **Chief of Police**

June 23, 2014

SERGEANT BRIAN BANSNER

Sergeant Bansner:

I want to express my thanks to you for the excellent and outstanding job performance by you as a firearms instructor. The 2014 firearms in-service training for pistol, shotgun and patrol rifle resulted in a great job done by all. A safe, effective and efficient range was due to the professionalism, knowledge, attention to detail and patience that you exhibited. I personally received a considerable amount of feedback from officers that attended the school.

You did a great job and we are very proud of you. A copy of this correspondence will be placed in your personnel file.

Thank you again!

Sincerely yours,

Mark W. Williams Chief of Police

MWW:jw

c.c.: Deputy Chief John Toomey Captain Edward Noonan

jwalters

From: mwilliams

Sent: Sunday, January 29, 2012 11:13 PM

To: mmurphy; rzasa; jscaramuzzino; sruddy; bbansner

Cc: jtoomey; dmickle; enoonan; 'n sbrucker; jwalters

Subject: Re: Utica Public Library- January 25th

Gentlemen:

On Thursday, January 26th, I received a telephone call from Darby O'Brien from the Utica Public Library. She wanted to call and thank the police officers who responded to the 911 call from January 25th, in we our department arrested two disorderly females. She appreciated our quick response and told me how her staff was extremely afraid by the conduct of these two females. Darby praise the actions of our police officers and appreciated your professionalism.

Thank you for representing the agency proudly. I am very proud of each of you.

Chief Williams

Note: Julie- Please make a copy of this email and place it in each personnel folder of the officers involved.





City of Utica Police Department

413 Oriskany Street West

Utica, New York 13502

Office Telephor

Work Cellular I

E-mail address multi-



CITY OF UTICA

DEPARTMENT OF PUBLIC SAFETY

413 Oriskany Street West, Utica, New York 13502

Fax



DAVID R. ROEFARO Mayor

Daniel N. LaBella Commissioner of Public Safety Mark W. Williams Chief of Police

November 19, 2010

POLICE OFFICER BRIAN BASNER

Dear Officer Basner:

Just want to express my thanks and appreciation to you for volunteering your time for the services of the late retired Chief Benny Rotundo. The service showed a great deal of respect from members of the Utica Police Department. We were very proud of Officers in attendance.

Thank you. It was very much appreciated.

Sincerely yours.

Mark W. Willliams Chief of Police

MWW:jw

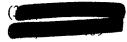


CITY OF UTICALL COOL

DEPARTMENT OF PUBLIC SAFETY

413 Oriskany Street West, Utica, New York 13502

Fax



DAVID R. ROEFARO Mayor

Daniel N. LaBella Commissioner of Public Safety Mark W. Williams
Chief of Police

September 22, 2010

OFFICER BRIAN BANSNER
OFFICER CHRISTOPHER FANIGLULA
OFFICER MICHAEL LADD
OFFICER JOSHUA SKIBINSKI

BRIAN

Officers Bansner, Faniglula, Ladd & Skibinski:

What a great impression you four officers made on a traffic stop this past weekend on Arthur Street. The attached letter was received by me from Venice Ervin who is associated with the Oneida County/Utica NAACP who was an observer that day and was treated professionally and courteously by you.

I want to thank each of you for the great work performed. It is always good to receive such favorable comments from the public and to know that our officers are doing their job to the best of their ability.

Thank you again and keep it up!

Sincerely yours,

Mark W. Williams
Chief of Police

MWW:jw Attachment

c.c.: Mayor David Roefaro

Commissioner Daniel LaBella Deputy Chief Mike Bailey Deputy Chief John Toomey Captain David Mickle



Oneida County/Utica NAACP Post Office Box 236 Utica, New York 13503

Legal Redress

Legal Redress Chairperson

Venice A. Ervin

Committee Members

Evon Ervin

David Mathis

Darlene M. Brown

Edward Jackson

Branch <u>President</u>

Sam Jones

1st Vice <u>President</u>

Craig Grant

Secretary

Edward Jackson

Treasurer

David Mathis

Executive Committee

Sam Jones Craig Grant Venice Ervin Deitra Harvey Evon Ervin Robbie Dancy Darlene Mack Brown David Mathis September 13, 2010

Chief Mark Williams 413 Oriskany Street West Utica, New York 13502

Mark over the weekend I was driving down Arthur Street and observed a traffic stop that was being conducted by four of your police officers. The traffic stop involved four young men that were occupying a SUV truck that had apparently committed a traffic infraction.

Your officers were conducting themselves in a very professional manner and did a very good job maintaining a safe environment for the recipients of the stop, the onlookers and themselves.

The following officers treated me with respect and did ask me to step back on the sidewalk, in a professional manner that was tough but appropriate for the situation. They also took strides to make the mother of one of the riders in the vehicle feel relaxed by having her wait on the sidewalk until the search of the vehicle was completed.

Please convey my thanks to the following officers for their work on September 11, 2010 and I hope that my minor interference did not hinder their process too much.

Officer C. R. Faniglula

Bansher

Ladd

Skibinski

The NAACP has been making great strides to work with and insure the development of a healthy relationship between the officers of your department and the residents of the City Of Utica. I will stay in contact with you on a regular basis to prevent the number of complaints and make you aware of any complaints that come into the office. Hopefully we can resolve most of them without all of the drama in the past.

Thanks.

Venice A. Ervin Legal Redress Chairperson

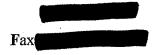
FILE COPY



UTICA POLICE DEPARTMENT

Office of the Chief of Police

413 Oriskany Street West, Utica, New York 13502



DAVID R. ROEFARO Mayor DANIEL N. LaBELLA
Chief of Police

July 21, 2009

OFFICER CHRISTOPHER FANIGLULA OFFICER BRIAN BANSNER

Officers Faniglula and Bansner:

Wanted to thank you for doing a great job on a vehicle stop on June 23, 2009. During the course of the stop, it was learned that one of the passengers was in possession of a loaded handgun as well as a quantity of crack cocaine and he was charged with Criminal Possession of a Weapon 3rd and misdemeanor and felony Criminal Possession of a Controlled Substance, 3rd; 5th and 7th degrees.

Keep up the good work. We are proud of both of you!

Sincerely yours,

Mark W. Williams
Deputy Chief of Police

MWW:jw

c.c.: Mayor David R. Roefaro
Chief Daniel N. LaBella
Lieutenant Wayne Manolescu
Captain John Toomey



CENTREICATE OF COMPLETION

AWARDED TO

BRIAN BANSNER

AIRBORNE AND BLOODBORNE PATHOGENS IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF

COURSE # INFO103

HOUR OF TRAINING

CERTIFICATE ISSUED NOV 04, 2021

Starlet Franz





Certificate of Training

This certifies that

BRIAN BANSNER

has successfully completed:

De-Escalation and Communication, Part I

On: 09/10/2020

Kovin Crawion Foodbyk Direkt



Certificate of Training

This certifies that

BRIAN BANSNER

has successfully completed:

De-Escalation and Communication, Part II

On: 09/10/2020





Certificate of Training

This certifies that

BRIAN BANSNER

has successfully completed:

Uncovering Implicit Bias

On: 09/08/2020



https://firstnetcampus.com/firstnet/campus/ngshare/scpage/certs/usercert2.asp?CC=EM40,09/08/2020,0,



Certificate of Training

This certifies that

BRIAN BANSNER

has successfully completed:

Anti-Bias Policing: Part 1

On: 09/08/2020





ONLINE UNIVERSITY

Certificate of Training

This certifies that

BRIAN BANSNER

has successfully completed:

Anti-Bias Policing: Part 2

On: 09/10/2020

Kevisi Orawing Executive Director

https://firstnetcampus.com/firstnet/campus/ngshare/scpage/certs/usercert2.asp?CC=PT52,09/10/2020,0,



CERTIFICATE OF ATTENDANCE

THIS CERTIFICATE IS AWARDED TO

Brian Bansner

FOR ATTENDING THE LEXIPOL WEBINAR

New York Legislative Update: Understanding Recent Police Reform Legislation [75 minutes]

July 30, 2020

Division of Criminal Justice Services State of New York

Hereby Acknowledges and Declares that

Brian Bansner

has attended the

New York Law Enforcement and the Law-Updates, Practices and Procedures Course

given under the auspices of the

NYS Division of Criminal Justice Services Utica, New York March 8, 2017



アイヤノ

Michael R. Wood Deputy Commissioner

YOUR HOMeland Security
STATE and Emergency Services

Emergency Management

Certificate of Completion

Awarded to

BRIAN BANSNER

For Completing:

I-300 Intermediate ICS For Expanding Incidents March 1, 2017 O

24 Hours

Jah ? ngludh

Commissioner
NYS Division of Homeland Security and Emergency Services

Certificate of Training

E S S S

TruNarc TN 4-hour training course

This is to certify that

Lieutenant Brian D. Bansner

has successfully completed the Thermo Scientific TruNarc training course; including theory of operation, sampling, laser safety, and maintenance.

James W. Westgate, Training Director Thermo Fisher Scientific Janua Willespate

12/12/2016

Thermo Fisher Scientific 2 Radcliff Road Tewksbury, MA 01876 www.thermoscientific.com/ahura

SCIENTISION SCIENTIFIC

Special Note: Thermo Fisher Scientific recommends that all users regularly read and refer to the TruNarc User Manual. Certified refresher training is recommended every 2 years.
Certificate is not valid until it is signed by a Thermo Fisher Scientific Certified representative.

TASER Conducted Electrical Weapon

INSTRUCTOR CERTIFICATION

Brian Bansner

This certifies that the above named individual has completed the training required and has passed a written examination in the use and instruction of the TASER X26, X26P, X2 Conducted Electrical Weapon(s). The above named individual is hereby certified as a TASER CEW Instructor and may certify others as users under the guidelines of the TASER Training Academy.

By accepting this Instructor Certificate, the Student accepts the terms of the Training Materials License Agreement, incorporated herein by reference, and agrees to be bound by its terms as a Licensee of TASER International, Inc. This certification is good for two

In witness whereof, TASER International, Incorporated has caused this certificate to be signed by its duly authorized representative.

Certifying Master Instructor Daniel Carlson

USE OF FORCE SUMMIT



MOHEGAN SUN CONVENTION CENTER
DECEMBER 1ST – 3RD, 2015
21 HOURS OF INSTRUCTION

BRIAN BANSNER

L. P. Big

DECEMBER 3, 2015

DATE

ERIC P. DAIGLE, ESQ.

State of New York

Division of Criminal Justice Services

Municipal Police Training Council

and Declares that Hereby Acknowledge

Brian D. B.

SOLO HOX

Deputy Commissioner Division of Criminal Justice Services

Ronald G. Spike Chairman Municipal Police Training Council

Division of Criminal Justice Services State of New York

Hereby Acknowledges and Declares that

Brian Bansner

has aftended the

New York Law Enforcement and the Law-Updates, Practices and Procedures Course

Silven under the auspiees lot

NYS Division of Criminal Justice Services
Utica, New York
December 3, 2004

phal

Michael R. Wood
Deputy Commissioner
Division of Criminal Justice Services

Division of Criminal Justice Services State of New York

Hereby Acknowledges and Declares that

Brian D. Bansner

has attended the

Identification Procedures - Photo Array (Online) Course

Ven under the auspices of

Mohawk Valley Police Academy

Michael R. Wood
Deputy Commissioner
Division of Criminal Justice Services



New York State Preparedness Training Center

Certificate of Completion

Awarded to

Brian Bansner

For attending and completing:

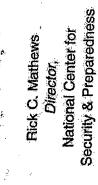
Critical Decision Making May 1-2, 2014 16 hours

Delivered at: Mohawk Valley Police Academy

Utica, New York



Jerome M. Hauer Commissioner, NYS Division of Homeland Security And Emergency Services





State of New York

Division of Criminal Justice Services

Municipal Police Training Council

Hereby Acknowledges and Declares that

Brian D. Bansner

XO IO IO IO X

Expiration Date

Tony Perez

Deputy Commissioner Division of Criminal Justice Services ...

Thomas Belfiore Chairman

Municipal Police Training Council

State of New York

Division of Criminal Justice Services

Municipal Police Training Council

Hereby Acknowledges and Declares that

Brian D. Bansner

has successfully completed the

Course in Police Supervision

which satisfies the minimum criteria established by the Municipal Police Training Council conducted at the Mohawk Valley Police Academy Ufica, New York April 21 - May 9, 2014

Poull of file

Ronald G. Spike Chairman Municipal Police Training Council

ahal

Michael R. Wood
Deputy Commissioner
Division of Criminal Justice Services

Emergency Management Institute



This Certificate of Achievement is to acknowledge that

BRIAN D BANSNER

professional development and completion of the independent study course: has reaffirmed a dedication to serve in times of crisis through continued IS-00200.b

ICS for Single Resources and Initial Action Incident, ICS-200

Issued this 5th Day of May, 2014





TRAINING ACADEMY

TASER X26, X2 & X26P Conducted Electrical Weapon INSTRUCTOR CERTIFICATION

Brian D. Bansner

examination in the use and instruction of the TASER X26, X2 and X26P Conducted Electrical Weapon (CEWs). The above named This certifies that the above named individual, **Brian D. Bansne**r, has completed the training required and has passed a written Training Academy. By accepting this Instructor Certificate, the Recipient accepts the terms of the Training Materials License individual is hereby certified as a TASER CEW Instructor and may certify others as users under the guidelines of the TASER Agreement, incorporated herein by reference, and agrees to be bound by its terms as a Licensee of TASER International, Inc. In witness whereof, TASER International, Incorporated has caused this certificate to be signed by its duly authorized representative. his certification is valid until 03/07/2016

Daniel Carlson Master Instructor

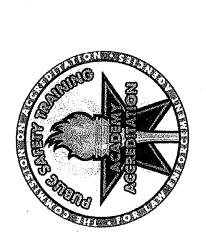
Northeast Counterdrug Training Center

This is to recognize

BRIAN BANSNE

for successfully completing the requirements of

Cannabis Indoor Grow



(16Hours)

Binghamton, NY Conducted at





Michael Reardon

Officer in Charge, Northeast Counterdrug Training Center Chief Warrant Officer, United States Army

Kraig R. Kiehl 🖣

Acting Commander, PA Counterdrug Joint Task Force Major, United States Army

Lirebire Aducation and Araking

Erinfinal Indestigation Oraining Center

This is to Certify that

NARK® II Progressive System of Drug Identification has attended and successfully completed The Instructors Course in employing the and is therefore awarded this Brian D. Bansner

Anstructors Artificate

Given at Utica, New York the day of October 22nd, 2012.

Seel Though

Swee Kenni

999-511 EN0732

Division of Criminal Justice Services State of New York

Hereby Acknowledges and Declares that

Brian Bansner

has attended an

Impact of High Stress Events Training

given under the auspices of

NYS Division of Criminal Justice Service Utica, New York November 28, 2012

Lay Kung

Tony Perez
Deputy Commissioner
Division of Criminal Justice Services

State of New York

Division of Criminal Justice Services

Municipal Police Training Council

Hereby Acknowledges and Declares that

Brian D. Bansner

has successfully completed the

olice Field Training Officer Cours

orteria-established by the

Soriducted at the

Iohawk Valley Police Academy

Postle gifter

Ronald G. Spike
Chairman
Municipal Police Training Council

Contraction of the second

Tony Perez
Deputy Commissioner
Division of Criminal Justice Services



New York State Division of Homeland Security and Emergency Services

Centificate of Attendance

Awarded to

Srian Bansher

For attending:

Law Enforcement Active Shooter Emergency Response October 4-6, 2011 Train-the-Trainer 24 hours

Delivered at: The State Preparedness Training Center

Oriskany, New York

James M. Aheury

Acting Commissioner of NYS Division of Homeland Security And Emergency Services



CERTIFICATE OF COMPLETION PRESENTED TO

BRIAN BANSNER

FOR COMPLETION OF

THE SPECIALIZED PASSENGER VEHICLE CRIMINAL ANI TERRORIST IDENTIFICATION AND APPREHENSION WORKSHOP

PHASE 7 * 24 HOURS

Syracuse, New York Sept 26,27 & 28, 2011 Jack E. Da

DESERT SNOW
PRESIDENT

Dedicated To All Those Who Traffic Contraband....

And The Law Enforcement Officers Who Relentlessly Pursue Them!!!



New York State Division of Homeland Security and Emergency Services

Certificate of Attendance

Awarded to

Bansner Bansner

For attending:

Law Enforcement Active Shooter Emergency Response Train-the-Trainer October 4-6, 2011 24 hours

Delivered at: The State Preparedness Training Center

Oriskany, New York

Laws M. theun

Acting Commissioner of NYS Division of Homeland Security And Emergency Services



CERTIFICATE OF COMPLETION PRESENTED TO

BRIAN BANSNER

FOR COMPLETION OF

THE SPECIALIZED PASSENGER VEHICLE CRIMINAL ANI TERRORIST IDENTIFICATION AND APPREHENSION Syracuse, New York PHASE 7 * 24 HOURS WORKSHOP

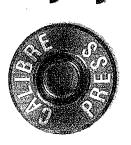


Jack E.

Sept 26,27 & 28, 2011

Dedicated To All Those Who Traffic Contraband....

And The Law Enforcement Officers Who Relentlessly Pursue Them!!!



This certifies that

Brian Bansner

has satisfactorily completed

THE STREET SURVIVAL SEMINAR

Whitesboro, NY - April 18 - 19, 2011

conducted by CALIBRE PRESS, LLC.

POLICE ONE. COM



CALIBRE PRESS, LLC.

200 GREEN ST STE 200 SAN FRANCISCO

1.800.323.0037 www.CallbrePress.com

16 Hours of Instruction

Webenth S. C.

Alex Ford, Director of Curriculum

Certificate of Training

Awarded to

Brian Bansner

the National Center for Biomedical Research and Training in recognition for successful completion of Academy of Counter-Terrorist course

Law Enforcement Active Shooter Emergency Response Performance Level

issued on January 13, 2011

16.00 Contact Hours

National Center for Biomedical Research and Training

Federal Emergency Management Agency Training and Exercise Integration Director, Training Operations National Integration Center Steve Schuetz











Monday, January 31, 2011

National Center for Biomedical Research and Training

Academy for Counter -Terrorist Education

Louisiana State University 3128 Pleasant Hall Baton Rouge, LA 70803

O (877) 829 - 8550 (225) 578 - 8973 Brian Bansner,

Thank you for attending training provided by the National Center for Biomedical Research and Training, Academy of Counter-Terrorist Education. This letter verifies your grade and hours earned in the "Law Enforcement Active Shooter Emergency Response" course held 1/12/2011 to 1/13/2011 in Oriskany, NY.

Grade:

Hours Completed: 16.00

Continuing Education Units: 0.160

A passing grade is earned by completing the course and achieving a satisfactory score on the post test.

This course satisfies the U.S. Department of Homeland Security Performance Level training requirements. NCBRT is an affiliate of Louisiana State University, which authorizes the Continuing Education Unit (CEU) standard. All NCBRT courses meet or exceed state training academy and/or state and national minimum training standards for Continuing Education Units.

Sincerely,

Thomas A. Tucker

Director

Certificate of Training

Brian Bansner

in recognition for successful completion of the National Center for Biomedical Research and Training Academy of Counter-Terrorist course

WMD Tactical Operations

Performance Level

issued on March 25, 2011

40.00 Contact Hours

Steve Schuetz

Federal Emergency Management Agency Training and Exercise Integration National Integration Center Director, Training Operations





National Center for Biomedical Research and Training









Thursday, March 31, 2011

National Center for Blomedical Research and Training

Academy for Counter -Terrorist Education

Louisiana State University 3128 Pleasant Hall Baton Rouge, LA 70803

O (877) 829 - 8550 F. (225) 578 - 8973 Brian Bansner,

Thank you for attending training provided by the National Center for Biomedical Research and Training, Academy of Counter-Terrorist Education. This letter verifies your grade and hours earned in the "WMD Tactical Operations" course held 3/21/2011 to 3/25/2011 in Oriskany, NY.

Grade: Pas

Hours Completed: 40.00

Continuing Education Units: 4.000

A passing grade is earned by completing the course and achieving a satisfactory score on the post test:

This course satisfies the U.S. Department of Homeland Security
Performance Level training requirements. NGBRT is an affiliate of
Louisiana State University, which authorizes the Continuing Education Unit
(CEU) standard. All NCBRT courses meet or exceed state training
academy and/or state and national minimum training standards for
Continuing Education Units.

Sincerely,

Thomas A. Tucker Director

State of New York

Division of Criminal Justice Services

Municipal Police Training Council

Hereby Acknowledges and Declares that

Brian D. Bansner

as successfully completed the

Conducted Energy Device Course - Equival

which satisfies the minimum oritoria established by the unicipal Police Training Council

is Certificate Awarded June 8, 20

at Utica, New York 36 VIII CX

Municipal Police Training Council Thomas Belfiore

Division of Criminal Justice Services Deputy Commissioner



New York State Division of Homeland Security and Emergency Services

Certificate of Attendance

Awarded to

Brian Bansner

For attending:

PER 213 - Wide Area Search and Rescue 24 hours seemed a seemed July 12-14, 2011

Delivered at: The State Preparedness Training Center

The state of the s

官司与衛衛的人 沙龍松水馬 編出

Oriskany, New York

Franco M. Heury

Acting Commissioner of NYS Division of Homeland Security And Emergency Services





TEXAS ENGINEERING EXTENSION SERVICE

The Texas A&M University System

IN COOPERATION WITH THE

DEPARTMENT OF HOMELAND SECURITY

FEDERAL EMERGENCY MANAGEMENT AGENCY

Srian bansner

has successfully completed Wide Area Search

Oriskany, New York

24 Hours 2.40 CEUs



IRAIN - SERVE - RESPOND



New York State Office of Counter Terrorism

Certificate of Completion

Awarded to

Lausle Malerina Malerina

For attending:

Advanced Active Shooter Scenario - Operations (A2S2) June 1-2, 2011 23 Hours

Delivered at: State Preparedness Training Center

Oriskany, New York

Samos M. Aheury

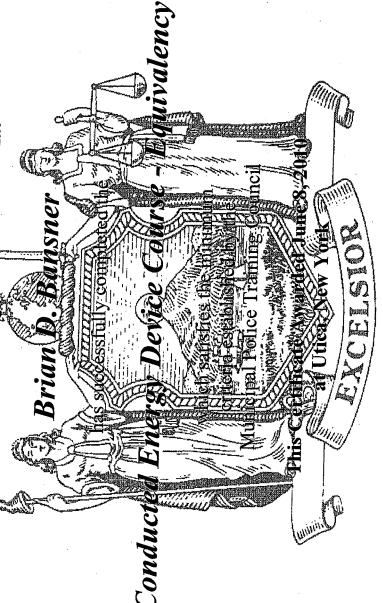
Acting Commissioner of NYS Division of Homeland Security And Emergency Services

State of New York

Division of Criminal Justice Services

Municipal Police Training Council

Hereby Acknowledges and Declares that



Throw By fire

I homas Belfiore Chairman Municipal Police Training Council

Kart of the state
Tony Perez
Deputy Commissioner
Division of Criminal Justice Services



Multijurisdictional Counterdrug Task Force Training

This is to certify that

Brian D. Bansner

Has satisfactorily completed the following 8 hour MCTFT training course held at

UTICA, NY

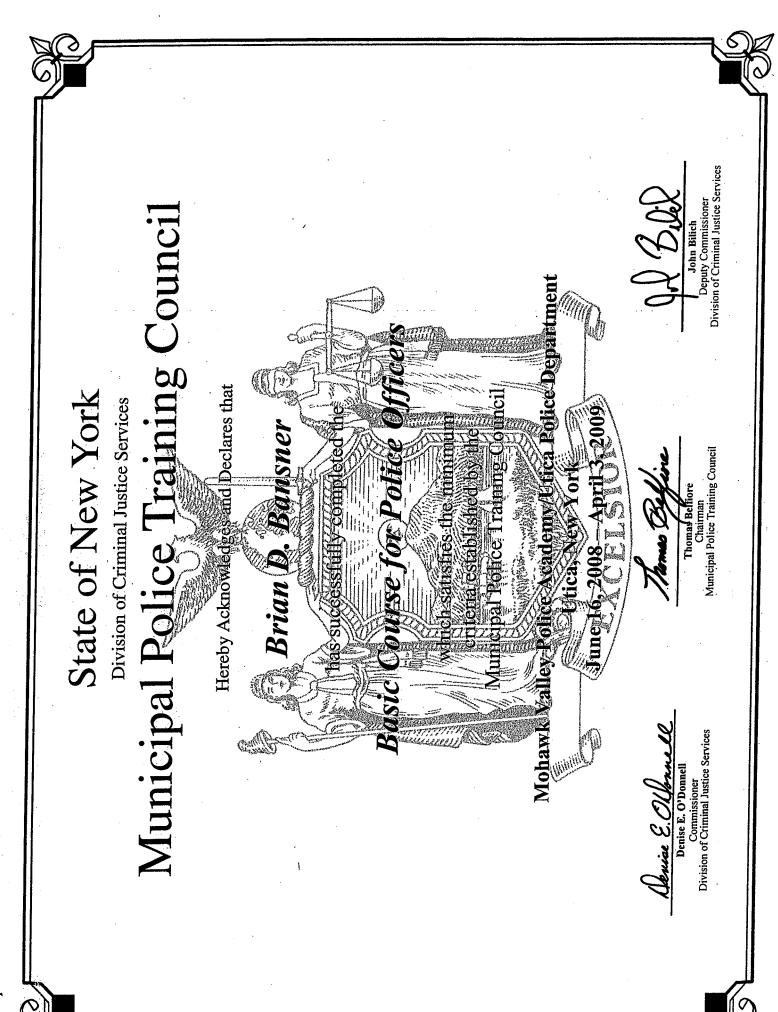
Interviews And Body Language Techniques

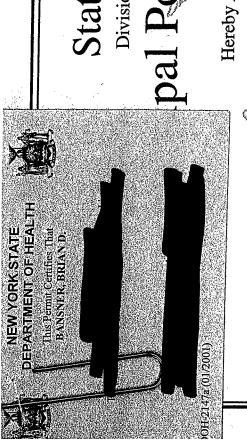
Training held 6/10/2010

President St. Petersburg College

Eileen Lahaie MCTFT Director

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





State of New York

Division of Criminal Justice Services

pal Police Training Council

Hereby Acknowledges and Declares that

Brian D. Bansner

has successfully completed the

Breath Inalysis Course

Which satisfies, the minimum

Municipal Police Francing Council

Unca New York
October 21 24, 2008

Tomes Befine

SO WING SO

Thomas Belliore Chairman

> Commissioner Division of Criminal Justice Services

uise E.OUlna

Chairman Municipal Police Training Council

9.4 6.002

| John Bilich Deputy Commissioner Division of Criminal Justice Services



BRIAN D. BANSNER

State of New York

Division of Criminal Justice Services

Veniae E. O. Wo

pal Police Training Council

Hereby Acknowledges and Declares that

Brian D. Bansner

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h satisfies the minimu

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Mohawk Valley Police Academy/Etica-Police De

Wy 28 31, 2008 Utica, New York

Municipal Police Training Council

Division of Criminal Justice Services

92 Sign

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Commissioner Division of Criminal Justice Services

New Mexico Tech

ENERGETIC MATERIALS RESEARCH AND TESTING CENTER

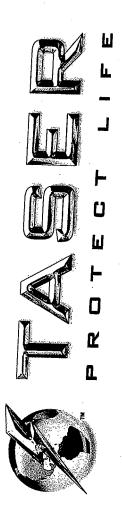
Brian D. Bansner

Incident Response to Terrorist Bombings Is hereby awarded this certificate and .4 continuing education units Awareness Level Training Course for successfully completing the 4 hour

January 30, 2009 - January 30, 2009

PM Hen E

Associate Director/Program Manager



TASER X26

Brian Bansner

Certified User

This Certifies that

Brian Bansner

and has passed the requirements of the Utica Police Department's TASER X26 training program under the supervision of a is trained in the proper and safe use of the TASER $^{\otimes}$ X26 Electronic Control Device

In Witness Whereof, Certified Instructor

Sergeant Michael Hauck

has certified the successful completion of the training requirements this day:

11/14/08

Certified Instructor:

Sof Mula Oplan

Certified Instructor ID;

070808483611412871346C

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Division of Criminal Justice Services State of New York

Hereby Acknowledges and Declares that

Brian Bansner

has attended the

Iuman Trafficking Training Semina

green under the auspices of

Division of Criminal Justice Service Utica, New York

9.4 Bar

John Bilich
Deputy Commissioner
Division of Criminal Justice Services.

Denise E. Olfane IC

Denise E. O'Donnell

Commissioner

Division of Criminal Justice Services

