

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: *Gary N. Taurisani*

Address: [REDACTED]

Telephone:

has this day been appointed to the position of Investigator

in the department of Public Safety- Bureau Of Police

the term to commence June 27, 2016

the term to end N/A

filling unexpired term of (if applicable)

Signed

Mayor

Title of Official

PERFORMANCE EVALUATION REPORT

| | | | | | | | | | | | | | | | | | | | |
|---|--|---|--|--|-------------------------------------|---|--|--|-------------------------------|--------------------------------|---|----------------------------------|--------------------------------|---|--|-------------------------------|--|--|--|
| NAME (FIRST, LAST, MI) Gary Taurisani DUTY ASSIGNMENT (I.E. DESK, STREET PATROL, BOOKING) CID | ID # 8377 | RANK Inv. | DIVISION/UNIT CID | | | | | | | | | | | | | | | | |
| | PERIOD COVERED 12 months | FROM 01/01/19 | TO 12/31/19 | | | | | | | | | | | | | | | | |
| PERFORMANCE LEVEL DEFINITIONS OUTSTANDING = 5 VERY GOOD = 4 ACCEPTABLE = 3 NEEDS IMPROVEMENT = 2 UNSATISFACTORY = 1 In making the evaluation of each category below, supervisors are to evaluate the employee's performance only for the past twelve month period and compare that performance to guidelines established in section 6.15 C (1 through 18) of General Order # 02-47 Personnel Performance Evaluations. | | | | | | | | | | | | | | | | | | | |
| 1. DUTY PERFORMANCE (ALL EMPLOYEES) <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;"> 5 PERSONAL APPEARANCE 4 </td> <td style="width: 25%; text-align: center;"> COMMAND PRESENCE 5 </td> <td style="width: 25%; text-align: center;"> REPORT WRITING ABILITY 5 </td> <td style="width: 25%; text-align: center;"> 4 INTERPERSONAL SKILLS (VERBAL) 4 </td> </tr> <tr> <td style="text-align: center;"> 5 RESPONSIVENESS TO SUPERVISION 4 </td> <td style="text-align: center;"> ATTENDANCE 5 </td> <td style="text-align: center;"> RELIABILITY 5 </td> <td style="text-align: center;"> 4 PERFORMANCE UNDER STRESS 4 </td> </tr> <tr> <td style="text-align: center;"> 4 PERFORMANCE 5 </td> <td style="text-align: center;"> PUNCTUALITY 4 </td> <td style="text-align: center;"> INVESTIGATIVE/PROBLEM SOLVING SKILLS 4 </td> <td></td> </tr> <tr> <td style="text-align: center;"> 4 JUDGMENT 4 </td> <td style="text-align: center;"> CARE AND USE OF EQUIPMENT 4 </td> <td style="text-align: center;"> KNOWLEDGE OF LAWS, POLICIES, ETC. 4 </td> <td></td> </tr> </table> | | | | 5 PERSONAL APPEARANCE 4 | COMMAND PRESENCE 5 | REPORT WRITING ABILITY 5 | 4 INTERPERSONAL SKILLS (VERBAL) 4 | 5 RESPONSIVENESS TO SUPERVISION 4 | ATTENDANCE 5 | RELIABILITY 5 | 4 PERFORMANCE UNDER STRESS 4 | 4 PERFORMANCE 5 | PUNCTUALITY 4 | INVESTIGATIVE/PROBLEM SOLVING SKILLS 4 | | 4 JUDGMENT 4 | CARE AND USE OF EQUIPMENT 4 | KNOWLEDGE OF LAWS, POLICIES, ETC. 4 | |
| 5 PERSONAL APPEARANCE 4 | COMMAND PRESENCE 5 | REPORT WRITING ABILITY 5 | 4 INTERPERSONAL SKILLS (VERBAL) 4 | | | | | | | | | | | | | | | | |
| 5 RESPONSIVENESS TO SUPERVISION 4 | ATTENDANCE 5 | RELIABILITY 5 | 4 PERFORMANCE UNDER STRESS 4 | | | | | | | | | | | | | | | | |
| 4 PERFORMANCE 5 | PUNCTUALITY 4 | INVESTIGATIVE/PROBLEM SOLVING SKILLS 4 | | | | | | | | | | | | | | | | | |
| 4 JUDGMENT 4 | CARE AND USE OF EQUIPMENT 4 | KNOWLEDGE OF LAWS, POLICIES, ETC. 4 | | | | | | | | | | | | | | | | | |
| 2. DAYS LOST DURING PERIOD COVERED BY THIS REPORT SICK: 2 INJURED ON-DUTY: 0 INJURED OFF-DUTY: 0 OTHER: 0 TOTAL OCCURENCES: 2 | | | | | | | | | | | | | | | | | | | |
| 3. SUPERVISORY PERSONNEL ONLY <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;"> LEADERSHIP QUALITIES </td> <td style="width: 25%; text-align: center;"> EFFECTIVENESS OF DELEGATION </td> <td style="width: 25%; text-align: center;"> TRAINING/COACHING OF SUBORDINATES </td> <td style="width: 25%; text-align: center;"> EVALUATION OF SUBORDINATES </td> </tr> </table> | | | | LEADERSHIP QUALITIES | EFFECTIVENESS OF DELEGATION | TRAINING/COACHING OF SUBORDINATES | EVALUATION OF SUBORDINATES | | | | | | | | | | | | |
| LEADERSHIP QUALITIES | EFFECTIVENESS OF DELEGATION | TRAINING/COACHING OF SUBORDINATES | EVALUATION OF SUBORDINATES | | | | | | | | | | | | | | | | |
| 4. NARRATIVE SECTION (This section is to be used to record specific and personal characteristics of this employee which are not adequately covered in the rating sections above. Any factors rated as a 1 or a 5 in the above sections must be articulated in this section.) | | | | | | | | | | | | | | | | | | | |

Inv. Taurisani continues to be an integral part of the Criminal Investigation Unit by handling the majority of the financial crime investigations. His knowledge in this field and the contacts he has acquired helps his investigations succeed.

Inv. Taurisani is always punctual and prepared to complete his tasks. His personal appearance is excellent and he is always well groomed.

Inv. Taurisani responsiveness to supervision is excellent and he can be relied on for any task requested of him. His report writing ability is excellent, he always provides clear and concise written reports.

Inv. Taurisani was assigned 61 Investigations in 2019, resulting in:

- 21 Arrests
- 7 Investigations closed by executive clearance
- 1 Investigation submitted for Grand Jury
- 9 Closed by investigation
- 2 Investigations closed by warrant
- 2 Investigations TOT
- 19 Investigations remain open

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

Investigator Taurisani can best improve his performance by:

- Attend trainings related to criminal investigations/ Financial Crime Investigations
- Continue to review and understand the CPL and Penal Law

(Continue on Back)

(Goal settings Continue From Front)

| | | | | | |
|---|--|--|--|--|--|
| 5. OVERALL PERFORMANCE RATING: This overall rating is to be based on the following factors: A. The employee's performance in his/her present assignment during the evaluation period; AND B. Consideration of the general needs of the Department, comparing the capabilities and characteristics of this employee to all other employees of equal rank and pay grade known to the evaluator. | | | | | |
| <input type="checkbox"/> OUTSTANDING <input checked="" type="checkbox"/> VERY GOOD <input type="checkbox"/> ACCEPTABLE <input type="checkbox"/> NEEDS IMPROVEMENT <input type="checkbox"/> UNSATISFACTORY | | | | | |
| 6. REVIEWING COMMANDING OFFICER: (Immediate Supervisor) Name: Lt. B. Coromato Signature <u>Lt. B. Coromato</u> Rank <u>Lieutenant # 1700</u> Date <u>01/28/2020</u> Print / Signature _____ | | | | | |
| 7. SUPERVISOR REVIEWING WITH EMPLOYEE: Name: Sgt. M. Fields Signature <u>Sgt. M. Fields</u> Rank <u>Sergeant # 2930</u> Date <u>01/28/2020</u> Print / Signature _____ | | | | | |
| 8. EMPLOYEE'S COMMENTS: (Optional) | | | | | |
| 9. EMPLOYEE'S SIGNATURE: This signature does not necessarily indicate agreement with this report. It verifies that this report has been personally reviewed with me and that I have received a copy of this report. If I do not agree with this report, I have indicated this by writing "under protest" next to my signature. I have also indicated whether I "request appeal" or "waive appeal" on this report. Signature <u>Inv. Gary Taurisani</u> Rank <u>Investigator # 8377</u> Date <u>01/28/2020</u> Print / Signature _____ | | | | | |

PERFORMANCE EVALUATION REPORT

| | | | |
|---|-----------------------------|---------------------|-----------------------------|
| NAME (FIRST, LAST, MI) Gary Taurisani | ID # 8377 | RANK Inv. | DIVISION/UNIT CID |
| DUTY ASSIGNMENT (I.E. DESK, STREET PATROL, BOOKING) CID | PERIOD COVERED 12 Months | FROM 01/01/18 | TO 12/31/18 |

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

1. DUTY PERFORMANCE (ALL EMPLOYEES)

| | | | | | | | |
|----------|--------------------------------------|----------|----------------------------------|----------|---|----------|--|
| 5 | GENERAL APPEARANCE | 4 | ASSIGNMENT TASKS | 5 | WORK QUALITY | 4 | KNOWLEDGE OF LAWS, POLICIES, ETC. |
| 5 | RESPONSIVENESS TO SUPERVISION | 4 | ATTENDANCE | 5 | RELIABILITY | 5 | REPORT WRITING ABILITY |
| 4 | INITIATIVE | 5 | PUNCTUALITY | 4 | INVESTIGATIVE/PROBLEM SOLVING SKILLS | 4 | INTERACTION WITH PUBLIC |
| 4 | JUDGMENT | 4 | CARE AND USE OF EQUIPMENT | 4 | INTERACTION WITH OTHER MEMBERS OF THE DEPARTMENT | | |
| 4 | COMMAND | | PERFORMANCE | | COMMUNICATION | | |
| 4 | PRESENCE | 4 | UNDER STRESS | 4 | SKILLS (VERBAL) | | |

2. SUPERVISORY PERSONNEL ONLY

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

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

General Appearance - Inv. Taurisani's general appearance is excellent. He is always properly groomed and attire is clean and neat.

Responsiveness to Supervision - Inv. Taurisani has a positive attitude and accepts direction well.

Attendance - Inv. Taurisani used 1 sick day during 2018.

Punctuality - Inv. Taurisani is always punctual and prepared to perform his tasks.

Work Quality - Inv. Taurisani provides excellent work quality and is thorough with his assigned investigations.

Reliability- Inv. Taurisani can be counted on to complete required tasks and can be trusted to complete the tasks.

Report Writing Ability- Inv. Taurisani consistently completes clear and concise written reports by clearly articulating his investigations and arrests.

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

Investigator Taurisani can best improve his performance by:

- Attend trainings related to criminal investigations/ Financial Crime Investigations
- Continue to review and understand the CPL and Penal Law

(Continue on Back)

(Goal settings Continue From Front)

4. OVERALL PERFORMANCE RATING: This overall rating is to be based on the following factors:
- A. The employee's performance in his/her present assignment during the evaluation period; AND
 - B. Consideration of the general needs of the Department, comparing the capabilities and characteristics of this employee to all other employees of equal rank and pay grade known to the evaluator.

EXCELLENT GOOD ACCEPTABLE NEEDS IMPROVEMENT UNSATISFACTORY

5. REVIEWING COMMANDING OFFICER: (Immediate Supervisor) Name: Lt. Coromato
Signature Lt. B. Coromato Rank Lieutenant # 1700 Date 01/29/19
Print / Signature

6. SUPERVISOR REVIEWING WITH EMPLOYEE: Name: Sgt. M. Fields
Signature Sgt. M. Fields Rank Sergeant # 2930 Date 01/29/19
Print / Signature

7. EMPLOYEE'S COMMENTS: (Optional)

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

Signature Inv. Gary Taurisani Rank Investigator # 8377 Date 01/29/19
Print / Signature

PERFORMANCE EVALUATION REPORT

| | | | |
|---|--------------------------|--------------------|-----------------------------|
| NAME (FIRST, LAST, MI) Gary Taurisani | ID # 8377 | RANK Inv | DIVISION/UNIT CID |
| DUTY ASSIGNMENT (I.E. DESK, STREET PATROL, BOOKING) General Assignment Days | PERIOD COVERED 1 Year | FROM 01/01/2017 | TO 12/31/17 |

PERFORMANCE LEVEL DEFINITIONS**EXCELLENT = 5 GOOD = 4 ACCEPTABLE = 3****NEEDS IMPROVEMENT = 2****UNSATISFACTORY = 1**

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

1. DUTY PERFORMANCE (ALL EMPLOYEES)

| | | | | | | | |
|----------|--------------------------------------|----------|----------------------------------|----------|---|----------|--|
| 4 | GENERAL APPEARANCE | 4 | ASSIGNMENT TASKS | 4 | WORK QUALITY | 3 | KNOWLEDGE OF LAWS, POLICIES, ETC. |
| 4 | RESPONSIVENESS TO SUPERVISION | 3 | ATTENDANCE | 4 | RELIABILITY | 5 | REPORT WRITING ABILITY |
| 4 | INITIATIVE | 4 | PUNCTUALITY | 4 | INVESTIGATIVE/PROBLEM SOLVING SKILLS | 4 | INTERACTION WITH PUBLIC |
| 4 | JUDGMENT | 4 | CARE AND USE OF EQUIPMENT | 3 | INTERACTION WITH OTHER MEMBERS OF THE DEPARTMENT | | |
| 4 | COMMAND | 4 | PERFORMANCE | | COMMUNICATION | | |
| 4 | PRESENCE | 3 | UNDER STRESS | 4 | SKILLS (VERBAL) | | |

2. SUPERVISORY PERSONNEL ONLY

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

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

Appearance- Inv Taurisani is always neatly groomed and dressed well. He takes pride in his appearance.

Attendance- Inv Taurisani used 5 Sick Days this rating period.

Responsiveness to Supervision- Inv Taurisani reflects a positive attitude toward supervisory personnel. He accepts direction and supervision with a positive attitude.

Work Quality- Inv Taurisani continues to maintain high work quality. He excels in financial crime investigations which show how thorough his investigations are.

Report Writing Ability- Inv Taurisani's reports are meticulous and well written. He regularly uses correct grammar and spelling. His narratives are accurate and well documented. The reports are clear, concise and contain all necessary details.

How can this employee best improve his/her performance? Inv. Taurisani should attend more training to broaden his investigation background. The more training he receives will only make him a better well-rounded investigator.

Additional Narrative Section

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

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

EXCELLENT

GOOD

ACCEPTABLE

NEEDS IMPROVEMENT

UNSATISFACTORY

4. EVALUATING SUPERVISOR: (Immediate supervisor)

Print Name **B. Coromato**

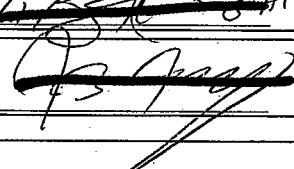
Signature 

Rank **Lt**

Date **1/26/18**

5. SUPERVISOR REVIEWING WITH EMPLOYEE:

Print Name **M. Murphy**

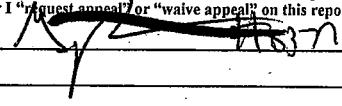
Signature 

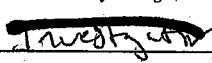
Rank **Sgt**

Date **1/26/18**

6. EMPLOYEE'S COMMENTS: (Optional)

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

SIGNATURE 

RANK 

DATE **1-26-18**

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

DATE
 MONTH 12 DAY 01 YEAR 2020

| TO: Utica Civil Service Commission | | NAME OF EMPLOYEE: Taurisani, Gary N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|--|--|-----------------------|--|--|------------------------------------|--|--------------------------------|--------------------------------------|--|------------------------------|------------------------------------|-----------------------|----------------------------|-------------------------------------|-----------------------|--------------------------|---|-----------------------|--------------------------|--|--|--------------------------------|--|--|-------------------|--|--|------------------------------|---------------------------------------|--|-----------------------|--------------------------------------|--|------------------------------|---|--------------------------------------|--|---------------------------|-------------------------------------|--|---------------------|-----------------------------------|--|---------------|----------------------------------|--|----------------------------|---|--|--------------------------|--|--|--|--------------------------|---|-----------------------|--------------------------|-----------------------------------|--|--------------------------|-----------------------------------|--|--------------------------|-------------------------------------|--|--------------------------|--|--|--------------------------|---|--|--------------------------|---------------------------------------|--|---------------------|---|--|---------------------|---|--|--------------------------|--------------------------------|---------|--------------------------|
| FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | ADDRESS: [REDACTED] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DEPARTMENT: Police Department | | TITLE OF POSITION: Investigator | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | SALARY: \$ 81,052. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | DATE OF BIRTH: [REDACTED] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | SOCIAL SECURITY NUMBER: [REDACTED] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th colspan="2"><i>Check Nature of Personnel Change</i></th> <th><i>Date Effective</i></th> <th><i>Action Necessary by Appointing Officer:</i></th> </tr> </thead> <tbody> <tr> <td rowspan="10">A P P O I N T M E N T S</td> <td><input type="checkbox"/> Permanent</td> <td></td> <td>Return report of Certification</td> </tr> <tr> <td><input type="checkbox"/> Provisional</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td><input type="checkbox"/> Temporary</td> <td>From: _____ To: _____</td> <td>State length of employment</td> </tr> <tr> <td><input type="checkbox"/> Substitute</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> For Term of Office</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Permanent Promotion</td> <td></td> <td>Return report of Certification</td> </tr> <tr> <td><input type="checkbox"/> Provisional Promotion</td> <td></td> <td>Attach nomination</td> </tr> <tr> <td><input type="checkbox"/> Non-Competitive Class</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td><input type="checkbox"/> Exempt Class</td> <td></td> <td>Submit this form only</td> </tr> <tr> <td><input type="checkbox"/> Labor Class</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td rowspan="5">T E R T M I O N N A S</td> <td><input type="checkbox"/> Resignation</td> <td></td> <td>Submit signed resignation</td> </tr> <tr> <td><input type="checkbox"/> Retirement</td> <td></td> <td>Give effective date</td> </tr> <tr> <td><input type="checkbox"/> Deceased</td> <td></td> <td>Indicate date</td> </tr> <tr> <td><input type="checkbox"/> Removal</td> <td></td> <td>Attach copy of proceedings</td> </tr> <tr> <td><input type="checkbox"/> Layoff (Lack of Work or Funds)</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td rowspan="10">O T H E R C H A N G E S</td> <td><input type="checkbox"/> Military Leave of Absence</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Other Leave of Absence</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Transfer</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Demotion</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Suspension</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Reinstatement</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Change in Classification</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> New Position</td> <td></td> <td>Submit form MSD-222</td> </tr> <tr> <td><input type="checkbox"/> Change in Salary</td> <td></td> <td>Indicate new salary</td> </tr> <tr> <td><input type="checkbox"/> Change in Name</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td>12/1/20</td> <td>Give facts under Remarks</td> </tr> </tbody> </table> | | | <i>Check Nature of Personnel Change</i> | | <i>Date Effective</i> | <i>Action Necessary by Appointing Officer:</i> | A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification | <input type="checkbox"/> Provisional | | Attach application (MSD-330) | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> Permanent Promotion | | Return report of Certification | <input type="checkbox"/> Provisional Promotion | | Attach nomination | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) | <input type="checkbox"/> Exempt Class | | Submit this form only | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) | T E R T M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation | <input type="checkbox"/> Retirement | | Give effective date | <input type="checkbox"/> Deceased | | Indicate date | <input type="checkbox"/> Removal | | Attach copy of proceedings | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks | O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks | <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> Transfer | | Give facts under Remarks | <input type="checkbox"/> Demotion | | Give facts under Remarks | <input type="checkbox"/> Suspension | | Give facts under Remarks | <input type="checkbox"/> Reinstatement | | Give facts under Remarks | <input type="checkbox"/> Change in Classification | | Give facts under Remarks | <input type="checkbox"/> New Position | | Submit form MSD-222 | <input type="checkbox"/> Change in Salary | | Indicate new salary | <input type="checkbox"/> Change in Name | | Give facts under Remarks | <input type="checkbox"/> Other | 12/1/20 | Give facts under Remarks |
| <i>Check Nature of Personnel Change</i> | | <i>Date Effective</i> | <i>Action Necessary by Appointing Officer:</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Provisional | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Permanent Promotion | | Return report of Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Provisional Promotion | | Attach nomination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Exempt Class | | Submit this form only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| T E R T M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Retirement | | Give effective date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Deceased | | Indicate date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Removal | | Attach copy of proceedings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Transfer | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Demotion | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Suspension | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Reinstatement | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Change in Classification | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> New Position | | Submit form MSD-222 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Change in Salary | | Indicate new salary | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Change in Name | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Other | 12/1/20 | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Remarks: (Continue on back if necessary)

[REDACTED]

[REDACTED]

[REDACTED]

Appointing Officer

Title

Address

Mark Mallory

Chief of Police

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

CERTIFICATE

valid until

(Date)

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

By

Date

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

DATE

MONTH 08 DAY 20 YEAR 2020

TO:
Utica Civil Service Commission

FROM: (Check only one)
 City County Town Village or District

DEPARTMENT:
Police Department

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

NAME OF EMPLOYEE:
Taurisani, Gary N

ADDRESS:

TITLE OF POSITION:

Investigator

SALARY:

\$ 81,052.

Veteran
 Disabled Veteran

Non-Veteran
 Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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| <input type="checkbox"/> Permanent | | | Return report of Certification |
| <input type="checkbox"/> Provisional | | | Attach application (MSD-330) |
| <input type="checkbox"/> Temporary | From: | To: | State length of employment |
| <input type="checkbox"/> Substitute | From: | To: | Give facts under Remarks |
| <input type="checkbox"/> For Term of Office | From: | To: | Give facts under Remarks |
| <input type="checkbox"/> Permanent Promotion | | | Return report of Certification |
| <input type="checkbox"/> Provisional Promotion | | | Attach nomination |
| <input type="checkbox"/> Non-Competitive Class | | | Attach application (MSD-330) |
| <input type="checkbox"/> Exempt Class | | | Submit this form only |
| <input type="checkbox"/> Labor Class | | | Attach application (MSD-330) |

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| <input type="checkbox"/> Resignation | | | Submit signed resignation |
| <input type="checkbox"/> Retirement | | | Give effective date |
| <input type="checkbox"/> Deceased | | | Indicate date |
| <input type="checkbox"/> Removal | | | Attach copy of proceedings |
| <input type="checkbox"/> Layoff (Lack of Work or Funds) | | | Give facts under Remarks |

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| <input type="checkbox"/> Military Leave of Absence | | | Give facts under Remarks |
| <input type="checkbox"/> Other Leave of Absence | From: | To: | Give facts under Remarks |
| <input type="checkbox"/> Transfer | | | Give facts under Remarks |
| <input type="checkbox"/> Demotion | | | Give facts under Remarks |
| <input type="checkbox"/> Suspension | | | Give facts under Remarks |
| <input type="checkbox"/> Reinstatement | | | Give facts under Remarks |
| <input type="checkbox"/> Change in Classification | | | Give facts under Remarks |
| <input type="checkbox"/> New Position | | | Submit form MSD-222 |
| <input type="checkbox"/> Change in Salary | | | Indicate new salary |
| <input type="checkbox"/> Change in Name | | | Give facts under Remarks |
| <input checked="" type="checkbox"/> Other | 8/20/20 | | Give facts under Remarks |

Remarks: (Continue on back if necessary)

[REDACTED]

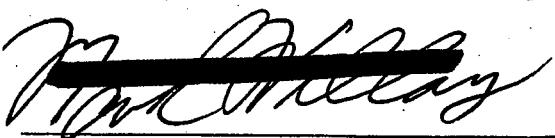
3.75% contract inc. eff. 4/1/20

Appointing Officer

Title

Address

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Chief of Police

CERTIFICATE

valid until

(Date)

This certifies that the above

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

By

Date

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

DATE

MONTH 04 DAY 01 YEAR 2020

TO:
Utica Civil Service Commission

FROM: (Check only one)
 City County Town Village or District

DEPARTMENT:
Police Department

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

NAME OF EMPLOYEE:
Taurisani, Gary N

ADDRESS:

TITLE OF POSITION:

Investigator

SALARY:

\$ 81,052.

Veteran

Non-Veteran

Disabled Veteran

Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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| A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification |
| | <input type="checkbox"/> Provisional | | Attach application (MSD-330) |
| | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment |
| | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> Permanent Promotion | | Return report of Certification |
| | <input type="checkbox"/> Provisional Promotion | | Attach nomination |
| | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) |
| | <input type="checkbox"/> Exempt Class | | Submit this form only |
| | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) |
| T E R T M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation |
| | <input type="checkbox"/> Retirement | | Give effective date |
| | <input type="checkbox"/> Deceased | | Indicate date |
| | <input type="checkbox"/> Removal | | Attach copy of proceedings |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks |
| | <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> Transfer | | Give facts under Remarks |
| | <input type="checkbox"/> Demotion | | Give facts under Remarks |
| | <input type="checkbox"/> Suspension | | Give facts under Remarks |
| | <input type="checkbox"/> Reinstatement | | Give facts under Remarks |
| | <input type="checkbox"/> Change in Classification | | Give facts under Remarks |
| | <input type="checkbox"/> New Position | | Submit form MSD-222 |
| | <input checked="" type="checkbox"/> Change in Salary | 4/1/20 | Indicate new salary |
| | <input type="checkbox"/> Change in Name | | Give facts under Remarks |
| | <input type="checkbox"/> Other | | Give facts under Remarks |

Remarks: (Continue on back if necessary)

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



Appointing Officer

Title

Address

Chief of Police

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

New Contract salary changes eff. 4/1/18

CERTIFICATE
valid until

(Date)

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

By

Date

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

DATE
 MONTH 04 DAY 01 YEAR 2019

TO:
Utica Civil Service Commission

FROM: (Check only one)

City County Town Village or District

DEPARTMENT:

Police Department

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

NAME OF EMPLOYEE:
Taurisani, Gary N

ADDRESS:

TITLE OF POSITION:
Investigator

SALARY:
\$ 78,122.

Veteran

Non-Veteran

Disabled Veteran

Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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| <input type="checkbox"/> Permanent | | | Return report of Certification |
| <input type="checkbox"/> Provisional | | | Attach application (MSD-330) |
| <input type="checkbox"/> Temporary | From: | To: | State length of employment |
| <input type="checkbox"/> Substitute | From: | To: | Give facts under Remarks |
| <input type="checkbox"/> For Term of Office | From: | To: | Give facts under Remarks |
| <input type="checkbox"/> Permanent Promotion | | | Return report of Certification |
| <input type="checkbox"/> Provisional Promotion | | | Attach nomination |
| <input type="checkbox"/> Non-Competitive Class | | | Attach application (MSD-330) |
| <input type="checkbox"/> Exempt Class | | | Submit this form only |
| <input type="checkbox"/> Labor Class | | | Attach application (MSD-330) |

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| <input type="checkbox"/> Resignation | | | Submit signed resignation |
| <input type="checkbox"/> Retirement | | | Give effective date |
| <input type="checkbox"/> Deceased | | | Indicate date |
| <input type="checkbox"/> Removal | | | Attach copy of proceedings |
| <input type="checkbox"/> Layoff (Lack of Work or Funds) | | | Give facts under Remarks |

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| <input type="checkbox"/> Military Leave of Absence | | | Give facts under Remarks |
| <input type="checkbox"/> Other Leave of Absence | From: | To: | Give facts under Remarks |
| <input type="checkbox"/> Transfer | | | Give facts under Remarks |
| <input type="checkbox"/> Demotion | | | Give facts under Remarks |
| <input type="checkbox"/> Suspension | | | Give facts under Remarks |
| <input type="checkbox"/> Reinstatement | | | Give facts under Remarks |
| <input type="checkbox"/> Change in Classification | | | Give facts under Remarks |
| <input type="checkbox"/> New Position | | | Submit form MSD-222 |
| <input checked="" type="checkbox"/> Change in Salary | 4/1/19 | | Indicate new salary |
| <input type="checkbox"/> Change in Name | | | Give facts under Remarks |
| <input type="checkbox"/> Other | | | Give facts under Remarks |

Remarks: (Continue on back if necessary)

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

Appointing Officer

Title

Address

Chief of Police

+

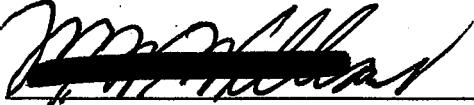
CERTIFICATE
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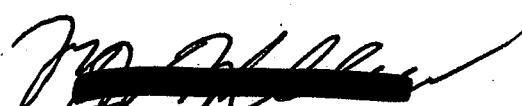
This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

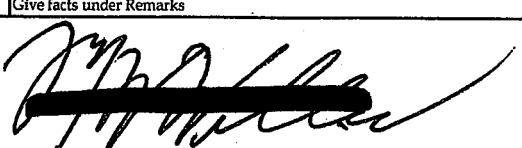
(Date)

Date

| Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE | | DATE MONTH 06 DAY 08 YEAR 2018 | |
|---|---|--|--|
| TO: Utica Civil Service Commission FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | NAME OF EMPLOYEE: Taurisani, Gary N ADDRESS: REDACTED | |
| DEPARTMENT: Police Department NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | TITLE OF POSITION: Investigator SALARY: \$ 75,299. | |
| | | DATE OF BIRTH: REDACTED SOCIAL SECURITY NUMBER: REDACTED | |
| <i>Check Nature of Personnel Change</i> | | <i>Date Effective</i> | <i>Action Necessary by Appointing Officer:</i> |
| A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification |
| | <input type="checkbox"/> Provisional | | Attach application (MSD-330) |
| | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment |
| | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> Permanent Promotion | | Return report of Certification |
| | <input type="checkbox"/> Provisional Promotion | | Attach nomination |
| | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) |
| | <input type="checkbox"/> Exempt Class | | Submit this form only |
| | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) |
| T E R T M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation |
| | <input type="checkbox"/> Retirement | | Give effective date |
| | <input type="checkbox"/> Deceased | | Indicate date |
| | <input type="checkbox"/> Removal | | Attach copy of proceedings |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks |
| | <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> Transfer | | Give facts under Remarks |
| | <input type="checkbox"/> Demotion | | Give facts under Remarks |
| | <input type="checkbox"/> Suspension | | Give facts under Remarks |
| | <input type="checkbox"/> Reinstatement | | Give facts under Remarks |
| | <input type="checkbox"/> Change in Classification | | Give facts under Remarks |
| | <input type="checkbox"/> New Position | | Submit form MSD-222 |
| | <input checked="" type="checkbox"/> Change in Salary | 4/1/18 | Indicate new salary |
| | <input type="checkbox"/> Change in Name | | Give facts under Remarks |
| <input type="checkbox"/> Other | | Give facts under Remarks | |
| Remarks: (Continue on back if necessary) | | | |
| New Contract salary changes eff. 4/1/18 pp. 6/8/18 | | | |
|  Appointing Officer Title _____ Address _____ | | | |
| CERTIFICATE valid until _____ (Date) _____ | | This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. | |
| | | By _____ Date _____ | |

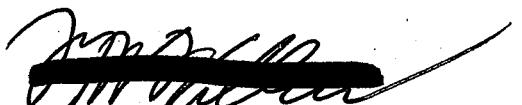
| Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE | | DATE MONTH 09 DAY 08 YEAR 2017 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TO: Utica Civil Service Commission | | NAME OF EMPLOYEE: Taurisani, Gary N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | ADDRESS: [REDACTED] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DEPARTMENT: Police Department | | TITLE OF POSITION: Investigator SALARY: \$ 68,913 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | DATE OF BIRTH: [REDACTED] SOCIAL SECURITY NUMBER: [REDACTED] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th colspan="2"><u>Check Nature of Personnel Change</u></th> <th><u>Date Effective</u></th> <th><u>Action Necessary by Appointing Officer</u></th> </tr> </thead> <tbody> <tr> <td rowspan="10" style="vertical-align: top; text-align: center;"> A P P O I N T M E N T S </td> <td><input type="checkbox"/> Permanent</td> <td></td> <td>Return report of Certification</td> </tr> <tr> <td><input type="checkbox"/> Provisional</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td><input type="checkbox"/> Temporary</td> <td>From: _____ To: _____</td> <td>State length of employment</td> </tr> <tr> <td><input type="checkbox"/> Substitute</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> For Term of Office</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input checked="" type="checkbox"/> Permanent Promotion</td> <td>6/27/2016</td> <td>Return report of Certification</td> </tr> <tr> <td><input type="checkbox"/> Provisional Promotion</td> <td></td> <td>Attach nomination</td> </tr> <tr> <td><input type="checkbox"/> Non-Competitive Class</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td><input type="checkbox"/> Exempt Class</td> <td></td> <td>Submit this form only</td> </tr> <tr> <td><input type="checkbox"/> Labor Class</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td rowspan="5" style="vertical-align: top; text-align: center;"> T E R T M I O N N A S </td> <td><input type="checkbox"/> Resignation</td> <td></td> <td>Submit signed resignation</td> </tr> <tr> <td><input type="checkbox"/> Retirement</td> <td></td> <td>Give effective date</td> </tr> <tr> <td><input type="checkbox"/> Deceased</td> <td></td> <td>Indicate date</td> </tr> <tr> <td><input type="checkbox"/> Removal</td> <td></td> <td>Attach copy of proceedings</td> </tr> <tr> <td><input type="checkbox"/> Layoff (Lack of Work or Funds)</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td rowspan="10" style="vertical-align: top; text-align: center;"> O T H E R C H A N G E S </td> <td><input type="checkbox"/> Military Leave of Absence</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Other Leave of Absence</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Transfer</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Demotion</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Suspension</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Reinstatement</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Change in Classification</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> New Position</td> <td></td> <td>Submit form MSD-222</td> </tr> <tr> <td><input type="checkbox"/> Change in Salary</td> <td></td> <td>Indicate new salary</td> </tr> <tr> <td><input type="checkbox"/> Change in Name</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input checked="" type="checkbox"/> Other</td> <td>9/8/17</td> <td>Give facts under Remarks</td> </tr> </tbody> </table> | | | <u>Check Nature of Personnel Change</u> | | <u>Date Effective</u> | <u>Action Necessary by Appointing Officer</u> | A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification | <input type="checkbox"/> Provisional | | Attach application (MSD-330) | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks | <input checked="" type="checkbox"/> Permanent Promotion | 6/27/2016 | Return report of Certification | <input type="checkbox"/> Provisional Promotion | | Attach nomination | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) | <input type="checkbox"/> Exempt Class | | Submit this form only | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) | T E R T M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation | <input type="checkbox"/> Retirement | | Give effective date | <input type="checkbox"/> Deceased | | Indicate date | <input type="checkbox"/> Removal | | Attach copy of proceedings | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks | O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks | <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> Transfer | | Give facts under Remarks | <input type="checkbox"/> Demotion | | Give facts under Remarks | <input type="checkbox"/> Suspension | | Give facts under Remarks | <input type="checkbox"/> Reinstatement | | Give facts under Remarks | <input type="checkbox"/> Change in Classification | | Give facts under Remarks | <input type="checkbox"/> New Position | | Submit form MSD-222 | <input type="checkbox"/> Change in Salary | | Indicate new salary | <input type="checkbox"/> Change in Name | | Give facts under Remarks | <input checked="" type="checkbox"/> Other | 9/8/17 | Give facts under Remarks |
| <u>Check Nature of Personnel Change</u> | | <u>Date Effective</u> | <u>Action Necessary by Appointing Officer</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Provisional | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input checked="" type="checkbox"/> Permanent Promotion | 6/27/2016 | Return report of Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Provisional Promotion | | Attach nomination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Exempt Class | | Submit this form only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| T E R T M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Retirement | | Give effective date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Deceased | | Indicate date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Removal | | Attach copy of proceedings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Transfer | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Demotion | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Suspension | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Reinstatement | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Change in Classification | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> New Position | | Submit form MSD-222 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Change in Salary | | Indicate new salary | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Change in Name | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Other | 9/8/17 | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Remarks: (Continue on back if necessary) [REDACTED] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  Appointing Officer Title _____ Address _____ + _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Permanent Investigator rank eff. 6/27/16. 1% Contract increase effective 10/1/15 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CERTIFICATE valid until _____ (Date) _____ | | This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | By _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Date _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

COPY

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|---|---|--|--|--|--------------------------------|
| Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE | | DATE | | | |
| | | MONTH 06 DAY 27 YEAR 2016 | | | |
| TO: Utica Civil Service Commission FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | NAME OF EMPLOYEE: Taurisani, Gary N ADDRESS: 111 Monroe St Utica, NY 13501 | | | |
| DEPARTMENT: Police Department | | TITLE OF POSITION: Investigator | | | |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | SALARY: \$ 68,913 | | | |
| | | <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman | | | |
| | | DATE OF BIRTH: SOCIAL SECURITY NUMBER: [REDACTED] | | | |
| A P P O I N T M E N T S | <i>Check Nature of Personnel Change</i> | | <i>Date Effective</i> | <i>Action Necessary by Appointing Officer:</i> | |
| | <input type="checkbox"/> Permanent | | | Return report of Certification | |
| | <input type="checkbox"/> Provisional | | | Attach application (MSD-330) | |
| | <input type="checkbox"/> Temporary | | From: | To: | State length of employment |
| | <input type="checkbox"/> Substitute | | From: | To: | Give facts under Remarks |
| | <input type="checkbox"/> For Term of Office | | From: | To: | Give facts under Remarks |
| | <input checked="" type="checkbox"/> Permanent Promotion | | 6/27/2016 | | Return report of Certification |
| | <input type="checkbox"/> Provisional Promotion | | | | Attach nomination |
| | <input type="checkbox"/> Non-Competitive Class | | | | Attach application (MSD-330) |
| | <input type="checkbox"/> Exempt Class | | | | Submit this form only |
| <input type="checkbox"/> Labor Class | | | | Attach application (MSD-330) | |
| T E R T M I O N N A S | <input type="checkbox"/> Resignation | | | Submit signed resignation | |
| | <input type="checkbox"/> Retirement | | | Give effective date | |
| | <input type="checkbox"/> Deceased | | | Indicate date | |
| | <input type="checkbox"/> Removal | | | Attach copy of proceedings | |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | | Give facts under Remarks | |
| O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | | | Give facts under Remarks | |
| | <input type="checkbox"/> Other Leave of Absence | | From: | To: | Give facts under Remarks |
| | <input type="checkbox"/> Transfer | | | | Give facts under Remarks |
| | <input type="checkbox"/> Demotion | | | | Give facts under Remarks |
| | <input type="checkbox"/> Suspension | | | | Give facts under Remarks |
| | <input type="checkbox"/> Reinstatement | | | | Give facts under Remarks |
| | <input type="checkbox"/> Change in Classification | | | | Give facts under Remarks |
| | <input type="checkbox"/> New Position | | | | Submit form MSD-222 |
| | <input type="checkbox"/> Change in Salary | | | | Indicate new salary |
| | <input type="checkbox"/> Change in Name | | | | Give facts under Remarks |
| <input type="checkbox"/> Other | | | | Give facts under Remarks | |
| Remarks: (Continue on back if necessary) | | | | | |
| Permanent Investigator rank eff. 6/27/16. | | | | | |
| 1% Contract increase effective 10/1/15 Updated 9/30/15:Temporary Investigator rank, 4% pay increase effective 7/6/15. | | | Appointing Officer Title Address [REDACTED] |  Chief of Police | |
| CERTIFICATE valid until <hr/> (Date) | | This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. | | | |
| | | By _____ Date _____ | | | |

COPY

| Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE | | DATE MONTH 07 DAY 06 YEAR 2015 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TO: Utica Civil Service Commission | | NAME OF EMPLOYEE: Taurisani, Gary N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | ADDRESS: [REDACTED] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DEPARTMENT: Police Department | | TITLE OF POSITION: Investigator | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | SALARY: \$ 68,231 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | DATE OF BIRTH: [REDACTED] SOCIAL SECURITY NUMBER: [REDACTED] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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type="checkbox"/> Provisional Promotion</td> <td></td> <td>Attach nomination</td> </tr> <tr> <td><input type="checkbox"/> Non-Competitive Class</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td><input type="checkbox"/> Exempt Class</td> <td></td> <td>Submit this form only</td> </tr> <tr> <td><input type="checkbox"/> Labor Class</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td rowspan="5">T E R R M I O N N A S</td> <td><input type="checkbox"/> Resignation</td> <td></td> <td>Submit signed resignation</td> </tr> <tr> <td><input type="checkbox"/> Retirement</td> <td></td> <td>Give effective date</td> </tr> <tr> <td><input type="checkbox"/> Deceased</td> <td></td> <td>Indicate date</td> </tr> <tr> <td><input type="checkbox"/> Removal</td> <td></td> <td>Attach copy of proceedings</td> </tr> <tr> <td><input type="checkbox"/> Layoff (Lack of Work or Funds)</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td rowspan="10">O T H E R C H A N G E 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<td><input type="checkbox"/> Change in Name</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td></td> <td>Give facts under Remarks</td> </tr> </tbody> </table> | | | <i>Check Nature of Personnel Change</i> | | <i>Date Effective</i> | <i>Action Necessary by Appointing Officer:</i> | A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification | <input type="checkbox"/> Provisional | | Attach application (MSD-330) | <input type="checkbox"/> Temporary | From: [REDACTED] To: [REDACTED] | State length of employment | <input type="checkbox"/> Substitute | From: [REDACTED] To: [REDACTED] | Give facts under Remarks | <input type="checkbox"/> For Term of Office | From: [REDACTED] To: [REDACTED] | Give facts under Remarks | <input type="checkbox"/> Permanent Promotion | | Return report of Certification | <input type="checkbox"/> Provisional Promotion | | Attach nomination | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) | <input type="checkbox"/> Exempt Class | | Submit this form only | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) | T E R R M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation | <input type="checkbox"/> Retirement | | Give effective date | <input type="checkbox"/> Deceased | | Indicate date | <input type="checkbox"/> Removal | | Attach copy of proceedings | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks | O T H E R C | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks | <input type="checkbox"/> Other Leave of Absence | From: [REDACTED] To: [REDACTED] | Give facts under Remarks | <input type="checkbox"/> Transfer | | Give facts under Remarks | <input type="checkbox"/> Demotion | | Give facts under Remarks | <input type="checkbox"/> Suspension | | Give facts under Remarks | <input type="checkbox"/> Reinstatement | | Give facts under Remarks | <input type="checkbox"/> Change in Classification | | Give facts under Remarks | <input type="checkbox"/> New Position | | Submit form MSD-222 | <input checked="" type="checkbox"/> Change in Salary | 7/6/15 | Indicate new salary | <input type="checkbox"/> Change in Name | | Give facts under Remarks | <input type="checkbox"/> Other | | Give facts under Remarks |
| <i>Check Nature of Personnel Change</i> | | <i>Date Effective</i> | <i>Action Necessary by Appointing Officer:</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Provisional | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Temporary | From: [REDACTED] To: [REDACTED] | State length of employment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Substitute | From: [REDACTED] To: [REDACTED] | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> For Term of Office | From: [REDACTED] To: [REDACTED] | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Permanent Promotion | | Return report of Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Provisional Promotion | | Attach nomination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Exempt Class | | Submit this form only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| T E R R M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Retirement | | Give effective date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Deceased | | Indicate date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Removal | | Attach copy of proceedings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| O T H E R C | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Other Leave of Absence | From: [REDACTED] To: [REDACTED] | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Transfer | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Demotion | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Suspension | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Reinstatement | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Change in Classification | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> New Position | | Submit form MSD-222 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input checked="" type="checkbox"/> Change in Salary | 7/6/15 | Indicate new salary | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Change in Name | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Other | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Remarks: (Continue on back if necessary) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Investigator rank eff. 7/6/15. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2% Contract Increase effective 4/1/15 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p style="text-align: right;"><i>[Signature]</i></p> <p>Appointing Officer Title _____ Address _____</p> <p>Chief of Police _____</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>CERTIFICATE Valid until _____</p> <p>This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above.</p> <p>By _____ Date _____</p> <p>(Date) _____</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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|---|---|---|---|---|--|--|
| Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE | | DATE MONTH 09 DAY 23 YEAR 2015 | | | | |
| TO: Utica Civil Service Commission FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | NAME OF EMPLOYEE: Taurisani, Gary N ADDRESS: [REDACTED] | | | | |
| DEPARTMENT: Police Department NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | TITLE OF POSITION: Investigator SALARY: \$ 68,913 | | | | |
| | | Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman <input type="checkbox"/> | | | | |
| | | DATE OF BIRTH: [REDACTED] SOCIAL SECURITY NUMBER: [REDACTED] | | | | |
| <u>Check Nature of Personnel Change</u> | | <u>Date Effective</u> | | | | |
| A P P O I N T M E N T S | <input type="checkbox"/> Permanent <input type="checkbox"/> Provisional <input type="checkbox"/> Temporary <input type="checkbox"/> Substitute <input type="checkbox"/> For Term of Office <input type="checkbox"/> Permanent Promotion <input type="checkbox"/> Provisional Promotion <input type="checkbox"/> Non-Competitive Class <input type="checkbox"/> Exempt Class <input type="checkbox"/> Labor Class | | <u>Action Necessary by Appointing Officer:</u> Return report of Certification Attach application (MSD-330) State length of employment Give facts under Remarks Give facts under Remarks Return report of Certification Attach nomination Attach application (MSD-330) Submit this form only Attach application (MSD-330) | | | |
| | T E R T M I O N N A S | <input type="checkbox"/> Resignation <input type="checkbox"/> Retirement <input type="checkbox"/> Deceased <input type="checkbox"/> Removal <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Submit signed resignation Give effective date Indicate date Attach copy of proceedings Give facts under Remarks | | |
| | | O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence <input type="checkbox"/> Other Leave of Absence <input type="checkbox"/> Transfer <input type="checkbox"/> Demotion <input type="checkbox"/> Suspension <input type="checkbox"/> Reinstatement <input type="checkbox"/> Change in Classification <input type="checkbox"/> New Position <input checked="" type="checkbox"/> Change in Salary <input type="checkbox"/> Change in Name <input type="checkbox"/> Other | From: _____ To: _____ 10/1/15 | Give facts under Remarks Give facts under Remarks Subint form MSD-222 Indicate new salary Give facts under Remarks Give facts under Remarks | |
| | | | Remarks: (Continue on back if necessary) | | | |
| | | | 1% Contract increase effective 10/1/15 | | | |
| | | | Investigator rank eff. 7/6/15. | | | |
| | Appointing Officer Title _____ Address _____ | | | | | |
| |  Chief of Police | | | | | |
| | CERTIFICATE valid until _____ (Date) _____ | | This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. | | | |
| | | | By _____ Date _____ | | | |

COPY

| Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE | | DATE MONTH 07 DAY 06 YEAR 2015 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--|--|-----------------------|--|--------------------------------|------------------------------------|--|--------------------------------|--------------------------------------|--|------------------------------|------------------------------------|-----------------------|----------------------------|-------------------------------------|-----------------------|--------------------------|---|-----------------------|--------------------------|--|--|--------------------------------|--|--|-------------------|--|--|------------------------------|---------------------------------------|--|-----------------------|--------------------------------------|--|------------------------------|----------------------------|--------------------------------------|--|---------------------------|-------------------------------------|--|---------------------|-----------------------------------|--|---------------|----------------------------------|--|----------------------------|---|--|--------------------------|--------------------------------|--|--|--------------------------|---|-----------------------|--------------------------|-----------------------------------|--|--------------------------|-----------------------------------|--|--------------------------|-------------------------------------|--|--------------------------|--|--|--------------------------|---|--|--------------------------|---------------------------------------|--|---------------------|--|--------|---------------------|---|--|--------------------------|--------------------------------|--|--------------------------|
| TO: Utica Civil Service Commission FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | NAME OF EMPLOYEE: Taurisani, Gary N ADDRESS: [REDACTED] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DEPARTMENT: Police Department | | TITLE OF POSITION: Investigator SALARY: \$ 68,231 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | DATE OF BIRTH: [REDACTED] SOCIAL SECURITY NUMBER: [REDACTED] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th colspan="2"><u>Check Nature of Personnel Change</u></th> <th><u>Date Effective</u></th> <th><u>Action Necessary by Appointing Officer:</u></th> </tr> </thead> <tbody> <tr> <td rowspan="10">A P P O I N T M E N T S</td> <td><input type="checkbox"/> Permanent</td> <td></td> <td>Return report of Certification</td> </tr> <tr> <td><input type="checkbox"/> Provisional</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td><input type="checkbox"/> Temporary</td> <td>From: _____ To: _____</td> <td>State length of employment</td> </tr> <tr> <td><input type="checkbox"/> Substitute</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> For Term of Office</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Permanent Promotion</td> <td></td> <td>Return report of Certification</td> </tr> <tr> <td><input type="checkbox"/> Provisional Promotion</td> <td></td> <td>Attach nomination</td> </tr> <tr> <td><input type="checkbox"/> Non-Competitive Class</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td><input type="checkbox"/> Exempt Class</td> <td></td> <td>Submit this form only</td> </tr> <tr> <td><input type="checkbox"/> Labor Class</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td rowspan="5">T E R M I O N N A S</td> <td><input type="checkbox"/> Resignation</td> <td></td> <td>Submit signed resignation</td> </tr> <tr> <td><input type="checkbox"/> Retirement</td> <td></td> <td>Give effective date</td> </tr> <tr> <td><input type="checkbox"/> Deceased</td> <td></td> <td>Indicate date</td> </tr> <tr> <td><input type="checkbox"/> Removal</td> <td></td> <td>Attach copy of proceedings</td> </tr> <tr> <td><input type="checkbox"/> Layoff (Lack of Work or Funds)</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td rowspan="10">O T H E R C H A N G E S</td> <td><input type="checkbox"/> Military Leave of Absence</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Other Leave of Absence</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Transfer</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Demotion</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Suspension</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Reinstatement</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Change in Classification</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> New Position</td> <td></td> <td>Submit form MSD-222</td> </tr> <tr> <td><input checked="" type="checkbox"/> Change in Salary</td> <td>7/6/15</td> <td>Indicate new salary</td> </tr> <tr> <td><input type="checkbox"/> Change in Name</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td></td> <td>Give facts under Remarks</td> </tr> </tbody> </table> | | | <u>Check Nature of Personnel Change</u> | | <u>Date Effective</u> | <u>Action Necessary by Appointing Officer:</u> | A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification | <input type="checkbox"/> Provisional | | Attach application (MSD-330) | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> Permanent Promotion | | Return report of Certification | <input type="checkbox"/> Provisional Promotion | | Attach nomination | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) | <input type="checkbox"/> Exempt Class | | Submit this form only | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) | T E R M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation | <input type="checkbox"/> Retirement | | Give effective date | <input type="checkbox"/> Deceased | | Indicate date | <input type="checkbox"/> Removal | | Attach copy of proceedings | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks | O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks | <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> Transfer | | Give facts under Remarks | <input type="checkbox"/> Demotion | | Give facts under Remarks | <input type="checkbox"/> Suspension | | Give facts under Remarks | <input type="checkbox"/> Reinstatement | | Give facts under Remarks | <input type="checkbox"/> Change in Classification | | Give facts under Remarks | <input type="checkbox"/> New Position | | Submit form MSD-222 | <input checked="" type="checkbox"/> Change in Salary | 7/6/15 | Indicate new salary | <input type="checkbox"/> Change in Name | | Give facts under Remarks | <input type="checkbox"/> Other | | Give facts under Remarks |
| <u>Check Nature of Personnel Change</u> | | <u>Date Effective</u> | <u>Action Necessary by Appointing Officer:</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Provisional | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Permanent Promotion | | Return report of Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Provisional Promotion | | Attach nomination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Exempt Class | | Submit this form only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| T E R M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Retirement | | Give effective date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Deceased | | Indicate date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Removal | | Attach copy of proceedings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Transfer | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Demotion | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Suspension | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Reinstatement | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Change in Classification | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> New Position | | Submit form MSD-222 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input checked="" type="checkbox"/> Change in Salary | 7/6/15 | Indicate new salary | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> Change in Name | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Other | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Remarks: (Continue on back if necessary) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Investigator rank eff. 7/6/15. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2% Contract Increase effective 4/1/15 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Appointing Officer Title _____ Address _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| CERTIFICATE valid until _____ (Date) _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| By _____ Date _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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

DATE

MONTH 04 DAY 01 YEAR 2015

TO:
Utica Civil Service Commission

FROM: (Check only one)

City County Town Village or District

DEPARTMENT:
Police Department

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

NAME OF EMPLOYEE:
Taurisani, Gary N

ADDRESS: [REDACTED]

TITLE OF POSITION:
Police Officer

SALARY: [REDACTED]

Veteran Non-Veteran
 Disabled Veteran Exempt Volunteer Fireman

DATE OF BIRTH: [REDACTED]

SOCIAL SECURITY NUMBER: [REDACTED]

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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| <input type="checkbox"/> Permanent | | Return report of Certification |
| <input type="checkbox"/> Provisional | | Attach application (MSD-330) |
| <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment |
| <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks |
| <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks |
| <input type="checkbox"/> Permanent Promotion | | Return report of Certification |
| <input type="checkbox"/> Provisional Promotion | | Attach nomination |
| <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) |
| <input type="checkbox"/> Exempt Class | | Submit this form only |
| <input type="checkbox"/> Labor Class | | Attach application (MSD-330) |

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| <input type="checkbox"/> Resignation | | Submit signed resignation |
| <input type="checkbox"/> Retirement | | Give effective date |
| <input type="checkbox"/> Deceased | | Indicate date |
| <input type="checkbox"/> Removal | | Attach copy of proceedings |
| <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks |

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| <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks |
| <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks |
| <input type="checkbox"/> Transfer | | Give facts under Remarks |
| <input type="checkbox"/> Demotion | | Give facts under Remarks |
| <input type="checkbox"/> Suspension | | Give facts under Remarks |
| <input type="checkbox"/> Reinstatement | | Give facts under Remarks |
| <input type="checkbox"/> Change in Classification | | Give facts under Remarks |
| <input type="checkbox"/> New Position | | Submit form MSD-222 |
| <input checked="" type="checkbox"/> Change in Salary | 4/1/15 | Indicate new salary |
| <input type="checkbox"/> Change in Name | | Give facts under Remarks |
| <input type="checkbox"/> Other | | Give facts under Remarks |

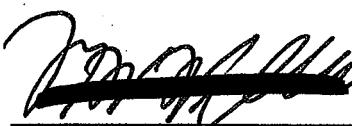
Remarks: (Continue on back if necessary)

2% Contract Increase effective 4/1/15

Appointing Officer

Title

Address


Chief of Police

CERTIFICATE

valid until

(Date)

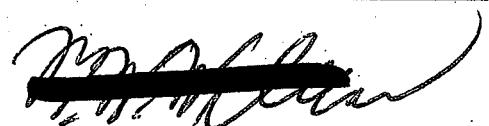
This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

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

DATE
 MONTH 10 DAY 01 YEAR 2014

| | | | |
|--|---|---|--------------------------------|
| TO: Utica Civil Service Commission | | NAME OF EMPLOYEE: Taurisani, Gary N | |
| FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | ADDRESS: [REDACTED] | |
| DEPARTMENT: Police Department | | TITLE OF POSITION: Police Officer | |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | SALARY: \$ 64,320 | |
| | | <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman | |
| | | DATE OF BIRTH: [REDACTED] | |
| | | SOCIAL SECURITY NUMBER: [REDACTED] | |
| <i>Check Nature of Personnel Change</i> | | <i>Date Effective</i> | |
| A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification |
| | <input type="checkbox"/> Provisional | | Attach application (MSD-330) |
| | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment |
| | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> Permanent Promotion | | Return report of Certification |
| | <input type="checkbox"/> Provisional Promotion | | Attach nomination |
| | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) |
| | <input type="checkbox"/> Exempt Class | | Submit this form only |
| | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) |
| T E R T M I O N N A S | <input type="checkbox"/> Resignation | | Submit signed resignation |
| | <input type="checkbox"/> Retirement | | Give effective date |
| | <input type="checkbox"/> Deceased | | Indicate date |
| | <input type="checkbox"/> Removal | | Attach copy of proceedings |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks |
| | <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> Transfer | | Give facts under Remarks |
| | <input type="checkbox"/> Demotion | | Give facts under Remarks |
| | <input type="checkbox"/> Suspension | | Give facts under Remarks |
| | <input type="checkbox"/> Reinstatement | | Give facts under Remarks |
| | <input type="checkbox"/> Change in Classification | | Give facts under Remarks |
| | <input type="checkbox"/> New Position | | Submit form MSD-222 |
| | <input checked="" type="checkbox"/> Change in Salary | 10/1/14 | Indicate new salary |
| | <input type="checkbox"/> Change in Name | | Give facts under Remarks |
| <input type="checkbox"/> Other | | Give facts under Remarks | |
| Remarks: (Continue on back if necessary) | | | |
| Contract Increase effective 10/1/14 | | | |
| <p style="text-align: right;"></p> <p>Appointing Officer Title _____ Address _____</p> <p>Chief of Police</p> | | | |
| CERTIFICATE valid until _____ (Date) _____ | | <p>This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above.</p> <p>By _____ Date _____</p> | |

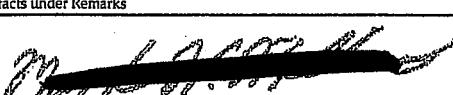
Report all personnel changes to this form
 Send ONE COPY prior to payroll affected by this change
 SUPPLEMENTARY PAYROLL CERTIFICATION AND
 REPORT OF PERSONNEL CHANGE

DATE
 MONTH 12 DAY 18 YEAR 2013

| | | | |
|---|---|--|---|
| TO: Utica Civil Service Commission | | NAME OF EMPLOYEE: Taurisani, Gary N | |
| FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | ADDRESS: | |
| DEPARTMENT: Police Department | | TITLE OF POSITION: Police Officer SALARY: \$ 62,435 | |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman | |
| | | DATE OF BIRTH: SOCIAL SECURITY NUMBER: [REDACTED] | |
| A P P O I N T M E N T S | <u>Check Nature of Personnel Change</u> | | |
| | | | <u>Date Effective</u> |
| | <input type="checkbox"/> Permanent | | Return report of Certification |
| | <input type="checkbox"/> Provisional | | Attach application (MSD-330) |
| | <input type="checkbox"/> Temporary | | State length of employment |
| | <input type="checkbox"/> Substitute | | Give facts under Remarks |
| | <input type="checkbox"/> For Term of Office | | Give facts under Remarks |
| | <input type="checkbox"/> Permanent Promotion | | Return report of Certification |
| | <input type="checkbox"/> Provisional Promotion | | Attach nomination |
| | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) |
| T E R R I M I O N N A S | <input type="checkbox"/> Exempt Class | | Submit this form only |
| | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) |
| | <input type="checkbox"/> Resignation | | Submit signed resignation |
| | <input type="checkbox"/> Retirement | | Give effective date |
| | <input type="checkbox"/> Deceased | | Indicate date |
| O T H E R C H A N G E S | <input type="checkbox"/> Removal | | Attach copy of proceedings |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks |
| | <input type="checkbox"/> Other Leave of Absence | | From: _____ To: _____ Give facts under Remarks |
| | <input type="checkbox"/> Transfer | | Give facts under Remarks |
| | <input type="checkbox"/> Demotion | | Give facts under Remarks |
| | <input type="checkbox"/> Suspension | | Give facts under Remarks |
| | <input type="checkbox"/> Reinstatement | | Give facts under Remarks |
| | <input type="checkbox"/> Change in Classification | | Give facts under Remarks |
| | <input type="checkbox"/> New Position | | Submit form MSD-222 |
| <input type="checkbox"/> Change in Salary | | Indicate new salary | |
| <input type="checkbox"/> Change in Name | | Give facts under Remarks | |
| <input type="checkbox"/> Other | | Give facts under Remarks | |

Remarks: (Continue on back if necessary)

Contract Increase effective 04/01/13



Appointing Officer

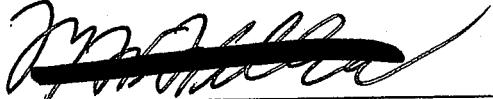
Chief of Police

Title

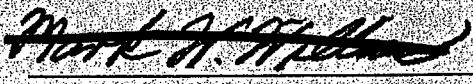
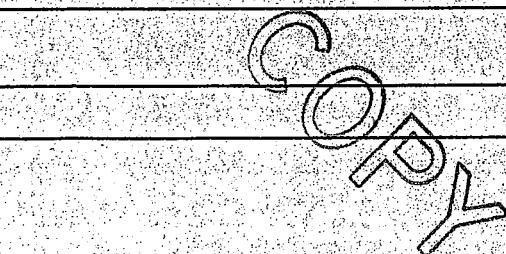
Address

| | | |
|--|--|------------------------|
| CERTIFICATE valid until (Date) _____ | This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. | By _____ Date _____ |
|--|--|------------------------|

COPY

| | | |
|---|---|---|
| Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE | | DATE MONTH 10 DAY 11 YEAR 2012 |
| TO: Utica Civil Service Commission FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | NAME OF EMPLOYEE: Taurisani, Gary N ADDRESS: DEPARTMENT: Police Department NAME AND TITLE OF LAST EMPLOYEE IN POSITION: TITLE OF POSITION: Police Officer SALARY: \$ 56,775. |
| | | TITLE OF POSITION: Police Officer <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman |
| | | DATE OF BIRTH: SOCIAL SECURITY NUMBER: Action Necessary by Appointing Officer: |
| A P P O I N T M E N T S | <input type="checkbox"/> Permanent | From: To: State length of employment |
| | <input type="checkbox"/> Provisional | From: To: Give facts under Remarks |
| | <input type="checkbox"/> Temporary | From: To: Give facts under Remarks |
| | <input type="checkbox"/> Substitute | From: To: Return report of Certification |
| | <input type="checkbox"/> For Term of Office | From: To: Attach nomination |
| | <input type="checkbox"/> Permanent Promotion | From: To: Attach application (MSD-330) |
| | <input type="checkbox"/> Provisional Promotion | From: To: Submit this form only |
| | <input type="checkbox"/> Non-Competitive Class | From: To: Attach application (MSD-330) |
| | <input type="checkbox"/> Exempt Class | From: To: Attach application (MSD-330) |
| <input type="checkbox"/> Labor Class | From: To: Submit signed resignation | |
| T E R T M I O N N A S | <input type="checkbox"/> Resignation | From: To: Give effective date |
| | <input type="checkbox"/> Retirement | From: To: Indicate date |
| | <input type="checkbox"/> Deceased | From: To: Attach copy of proceedings |
| | <input type="checkbox"/> Removal | From: To: Give facts under Remarks |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | From: To: Give facts under Remarks |
| O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence | From: To: Give facts under Remarks |
| | <input type="checkbox"/> Other Leave of Absence | From: To: Give facts under Remarks |
| | <input type="checkbox"/> Transfer | From: To: Give facts under Remarks |
| | <input type="checkbox"/> Demotion | From: To: Give facts under Remarks |
| | <input type="checkbox"/> Suspension | From: To: Give facts under Remarks |
| | <input type="checkbox"/> Reinstatement | From: To: Give facts under Remarks |
| | <input type="checkbox"/> Change in Classification | From: To: Give facts under Remarks |
| | <input type="checkbox"/> New Position | From: To: Submit form MSD-222 |
| | <input checked="" type="checkbox"/> Change in Salary | From: To: Indicate new salary |
| | <input type="checkbox"/> Change in Name | From: To: Give facts under Remarks |
| <input type="checkbox"/> Other | From: To: Give facts under Remarks | |
| Remarks: (Continue on back if necessary) | | |
| Longevity increase effective 10/15/2012 | | |
| Appointing Officer Title Address | | |
|  Chief of Police | | |
| CERTIFICATE valid until _____ (Date) _____ | | |
| This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. | | |
| By _____ Date _____ | | |

| | | | | | |
|--|---|---|---|---|--|
| Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE | | DATE MONTH 10 DAY 6 YEAR 2011 | | | |
| TO: Utica Civil Service Commission FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | NAME OF EMPLOYEE: Taurisani, Gary N ADDRESS: | | | |
| DEPARTMENT: Police Department | | TITLE OF POSITION: Police Officer SALARY: \$ 51,451. | | | |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | VETERAN <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman | | | |
| | | DATE OF BIRTH: SOCIAL SECURITY NUMBER: | | | |
| Check Nature of Personnel Change | | Date Effective | | | |
| A P P O I N T M E N T S | <input type="checkbox"/> Permanent <input type="checkbox"/> Provisional <input type="checkbox"/> Temporary <input type="checkbox"/> Substitute <input type="checkbox"/> For Term of Office <input type="checkbox"/> Permanent Promotion <input type="checkbox"/> Provisional Promotion <input type="checkbox"/> Non-Competitive Class <input type="checkbox"/> Exempt Class <input type="checkbox"/> Labor Class | | Return report of Certification Attach application (MSD-330) State length of employment Give facts under Remarks Give facts under Remarks Return report of Certification Attach nomination Attach application (MSD-330) Submit this form only Attach application (MSD-330) | | |
| | T E R T M I O N N A S | <input type="checkbox"/> Resignation <input type="checkbox"/> Retirement <input type="checkbox"/> Deceased <input type="checkbox"/> Removal <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Submit signed resignation Give effective date Indicate date Attach copy of proceedings Give facts under Remarks | |
| | | O T H E R C H A N G E S | <input type="checkbox"/> Military Leave of Absence <input type="checkbox"/> Other Leave of Absence <input type="checkbox"/> Transfer <input type="checkbox"/> Demotion <input type="checkbox"/> Suspension <input type="checkbox"/> Reinstatement <input type="checkbox"/> Change in Classification <input type="checkbox"/> New Position <input checked="" type="checkbox"/> Change in Salary <input type="checkbox"/> Change in Name <input type="checkbox"/> Other | From: _____ To: _____ 10/15/11 | Give facts under Remarks Give facts under Remarks Submit form MSD-222 Indicate new salary Give facts under Remarks Give facts under Remarks |
| | | | Remarks: (Continue on back if necessary) | | |
| | | | Longevity increase effective 10/15/2011 | | |
| | | | Appointing Officer Title _____ Address _____ | | |
| |  | | | | |
| | Chief of Police | | | | |
| | CERTIFICATE valid until _____ (Date) _____ | | This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. | | |
| | | | By _____ Date _____ | | |

| | | | |
|---|---|--|---|
| <p style="text-align: center;">Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE</p> | | DATE MONTH 10 DAY 13 YEAR 2010 | |
| TO: Utica Civil Service Commission | | NAME OF EMPLOYEE: Taurisani, Gary | |
| FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | ADDRESS: | |
| DEPARTMENT: Police Department | | TITLE OR POSITION: Police Officer | |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION: | | <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman | SALARY: \$ 49,315 |
| | | DATE OF BIRTH: | SOCIAL SECURITY NUMBER: |
| <i>Check Nature of Personnel Change</i> | | <i>Date Effective</i> | <i>Action Necessary by Appointing Officer</i> |
| A P P O I N T M E N T S | <input type="checkbox"/> Permanent | | Return report of Certification |
| | <input type="checkbox"/> Provisional | | Attach application (MSD-330) |
| | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment |
| | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> Permanent Promotion | | Return report of Certification |
| | <input type="checkbox"/> Provisional Promotion | | Attach nomination |
| | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) |
| T R I M I O N N A S | <input type="checkbox"/> Exempt Class | | Submit this form only |
| | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) |
| | <input type="checkbox"/> Resignation | | Submit signed resignation |
| | <input type="checkbox"/> Retirement | | Give effective date |
| | <input type="checkbox"/> Deceased | | Indicate date |
| | <input type="checkbox"/> Removal | | Attach copy of proceedings |
| | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks |
| | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks |
| O T H E R C H A N G E S | <input type="checkbox"/> Other Leave of Absence | From: _____ To: _____ | Give facts under Remarks |
| | <input type="checkbox"/> Transfer | | Give facts under Remarks |
| | <input type="checkbox"/> Demotion | | Give facts under Remarks |
| | <input type="checkbox"/> Suspension | | Give facts under Remarks |
| | <input type="checkbox"/> Reinstatement | | Give facts under Remarks |
| | <input type="checkbox"/> Change in Classification | | Give facts under Remarks |
| | <input type="checkbox"/> New Position | | Submit form MSD-222 |
| | <input checked="" type="checkbox"/> Change in Salary | 10/15/10 | Indicate new salary |
| <input type="checkbox"/> Change in Name | | Give facts under Remarks | |
| <input type="checkbox"/> Other | | Give facts under Remarks | |
| Remarks: (Continue on back if necessary) | | | |
| Longevity Increase effective 10/15/10 | | | |
| Appointing Officer Title Address | | | |
|  Chief of Police | | | |
| CERTIFICATE valid until _____ (Date) _____ | | This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. By _____ Date _____ | |
|  | | | |

| Report all personnel changes to this form. Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE | | DATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-----------------------|--|--|-----------------------|---|------------------------------------|--|--------------------------------|--------------------------------------|--|------------------------------|------------------------------------|-----------------------|----------------------------|-------------------------------------|-----------------------|--------------------------|---|-----------------------|--------------------------|--|--|--------------------------------|--|--|-------------------|--|--|------------------------------|---------------------------------------|--|-----------------------|--------------------------------------|--|------------------------------|--------------------------------------|--|---------------------------|-------------------------------------|--|---------------------|-----------------------------------|--|---------------|----------------------------------|--|---------------------------|---|--|--------------------------|--|--|--------------------------|---|-----------------------|--------------------------|-----------------------------------|--|--------------------------|-----------------------------------|--|--------------------------|-------------------------------------|--|--------------------------|--|--|--------------------------|---|--|--------------------------|---------------------------------------|--|---------------------|--|----------|---------------------|---|--|--------------------------|--------------------------------|--|--------------------------|
| | | MONTH 10 DAY 14 YEAR 2009 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TO: Utica Civil Service Commission <small>FROM: (Check only one)</small> <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District | | NAME OF EMPLOYEE: Taurisani, Gary N ADDRESS: <small>100 W. Genesee Street, Utica, NY 13501</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DEPARTMENT: Police Department | | TITLE OF POSITION: Police Officer SALARY: \$45686. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION: <small>(Leave blank if no change)</small> | | <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Present Volunteer Member | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DATE OF BIRTH: <small>(Leave blank if no change)</small> | | SOCIAL SECURITY NUMBER: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Check Nature of Personnel Change: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th></th> <th><i>Date Effective</i></th> <th><i>Action Necessary by Appointing Officer</i></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Permanent</td> <td></td> <td>Return report of Certification</td> </tr> <tr> <td><input type="checkbox"/> Provisional</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td><input type="checkbox"/> Temporary</td> <td>From: _____ To: _____</td> <td>State length of employment</td> </tr> <tr> <td><input type="checkbox"/> Substitute</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> For Term of Office</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Permanent Promotion</td> <td></td> <td>Return report of Certification</td> </tr> <tr> <td><input type="checkbox"/> Provisional Promotion</td> <td></td> <td>Attach nomination</td> </tr> <tr> <td><input type="checkbox"/> Non-Competitive Class</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td><input type="checkbox"/> Exempt Class</td> <td></td> <td>Submit this form only</td> </tr> <tr> <td><input type="checkbox"/> Labor Class</td> <td></td> <td>Attach application (MSD-330)</td> </tr> <tr> <td><input type="checkbox"/> Resignation</td> <td></td> <td>Submit signed resignation</td> </tr> <tr> <td><input type="checkbox"/> Retirement</td> <td></td> <td>Give effective date</td> </tr> <tr> <td><input type="checkbox"/> Deceased</td> <td></td> <td>Indicate date</td> </tr> <tr> <td><input type="checkbox"/> Removal</td> <td></td> <td>Attach copy of proceeding</td> </tr> <tr> <td><input type="checkbox"/> Layoff (Lack of Work or Funds)</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Military Leave of Absence</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Other Leave w/ Absence</td> <td>From: _____ To: _____</td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Transfer</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Demotion</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Suspension</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Reinstatement</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Change in Classification</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> New Position</td> <td></td> <td>Submit form MSD-222</td> </tr> <tr> <td><input checked="" type="checkbox"/> Change in Salary</td> <td>10/15/09</td> <td>Indicate new salary</td> </tr> <tr> <td><input type="checkbox"/> Change in Name</td> <td></td> <td>Give facts under Remarks</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td></td> <td>Give facts under Remarks</td> </tr> </tbody> </table> | | | | <i>Date Effective</i> | <i>Action Necessary by Appointing Officer</i> | <input type="checkbox"/> Permanent | | Return report of Certification | <input type="checkbox"/> Provisional | | Attach application (MSD-330) | <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment | <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> Permanent Promotion | | Return report of Certification | <input type="checkbox"/> Provisional Promotion | | Attach nomination | <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) | <input type="checkbox"/> Exempt Class | | Submit this form only | <input type="checkbox"/> Labor Class | | Attach application (MSD-330) | <input type="checkbox"/> Resignation | | Submit signed resignation | <input type="checkbox"/> Retirement | | Give effective date | <input type="checkbox"/> Deceased | | Indicate date | <input type="checkbox"/> Removal | | Attach copy of proceeding | <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks | <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks | <input type="checkbox"/> Other Leave w/ Absence | From: _____ To: _____ | Give facts under Remarks | <input type="checkbox"/> Transfer | | Give facts under Remarks | <input type="checkbox"/> Demotion | | Give facts under Remarks | <input type="checkbox"/> Suspension | | Give facts under Remarks | <input type="checkbox"/> Reinstatement | | Give facts under Remarks | <input type="checkbox"/> Change in Classification | | Give facts under Remarks | <input type="checkbox"/> New Position | | Submit form MSD-222 | <input checked="" type="checkbox"/> Change in Salary | 10/15/09 | Indicate new salary | <input type="checkbox"/> Change in Name | | Give facts under Remarks | <input type="checkbox"/> Other | | Give facts under Remarks |
| | <i>Date Effective</i> | <i>Action Necessary by Appointing Officer</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Permanent | | Return report of Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Provisional | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Temporary | From: _____ To: _____ | State length of employment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Substitute | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> For Term of Office | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Permanent Promotion | | Return report of Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Provisional Promotion | | Attach nomination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Non-Competitive Class | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Exempt Class | | Submit this form only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Labor Class | | Attach application (MSD-330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Resignation | | Submit signed resignation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Retirement | | Give effective date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Deceased | | Indicate date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Removal | | Attach copy of proceeding | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Layoff (Lack of Work or Funds) | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Military Leave of Absence | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Other Leave w/ Absence | From: _____ To: _____ | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Transfer | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Demotion | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Suspension | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Reinstatement | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Change in Classification | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> New Position | | Submit form MSD-222 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Change in Salary | 10/15/09 | Indicate new salary | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Change in Name | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Other | | Give facts under Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Remarks: (Continue on back if necessary) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Longevity increase effective 10/15/09 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  Appointing Officer <small>Title _____</small> <small>Address _____</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CERTIFICATE <small>valid until _____</small> <small>This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above.</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <small>By _____</small> <small>(Date) _____</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

UTICA POLICE DEPARTMENT

Personnel Order



| | | |
|---|---|------------|
| Issue date: 12/17/14 | Subject: Assignment / Transfer Orders | P.O. 14-52 |
| Issuing Authority Capt. E. Noonan | Approved by: Chief M. Williams | |

[REDACTED] Will leave C Platoon Squad 3 on Sunday January 11th, 2015 at 23:59 hours and he will report to Captain Edward Noonan at 15:45 hours on Monday January 12th, 2015 for assignment in C Platoon Squad 1.

[REDACTED] Will leave A Platoon Squad 1 on Thursday January 1st, 2015 at 23:59 hours and she will report to Lieutenant Charles Kelly at 23:45 hours on Saturday January 2nd, 2015 for assignment in A Platoon Squad 3.

[REDACTED] Will leave B Platoon Squad 3 on Saturday January 3rd, 2015 at 23:59 hours and he will report to Lieutenant Charles Kelly at 23:45 hours on Sunday January 4th, 2015 for assignment in A Platoon Squad 3.

[REDACTED] Will leave C Platoon Squad 2 on Tuesday January 6th, 2015 at 23:59 hours and he will report to Lieutenant Don Cinque at 15:45 hours on Wednesday January 7th, 2015 for assignment in C Platoon Squad 3.

[REDACTED] Will leave A Platoon Squad 2 on Tuesday January 6th, 2015 at 23:59 hours and will report to Lieutenant Don Cinque at 15:45 hours on Wednesday January 7th, 2015 for assignment in C Platoon Squad 2.

[REDACTED] Will leave the Special Operations Unit on Sunday January 4th, 2015 at 23:59 hours and he will report to Lieutenant Steve Hauck at 07:45 hours on Monday January 5th, 2015 for assignment in B Platoon Squad 3.

Capt. E. J. Hogan

[REDACTED] Will leave A Platoon Squad 3 on Saturday January 3rd, 2015 at 23:59 hours and he will report to Lieutenant Charles Kelly at 23:45 hours on Sunday January 4th, 2015 for assignment in A Platoon Squad 1.

[REDACTED]

Will leave the Uniformed Patrol Division on Sunday January 4th at 23:59 hours and he will report to Captain Mike Zdanowicz at 16:45 hours on Monday January 5th for a temporary assignment within the Criminal Investigations Division. PO Kelly will be granted a RDO on January 4th.

PO Gary Taurisani

[REDACTED]

Will leave the Uniformed Patrol Division on Sunday January 4th, 2015 at 23:59 hours and he will report to Captain Mike Zdanowicz at 08:45 hours on Monday January 5th, 2015 for a temporary assignment within the Criminal Investigations Division.

PO [REDACTED]

[REDACTED]

Will leave B Platoon Squad 2 on Saturday January 10th, 2015 at 23:59 hours and she will report to Lieutenant Steve Hauck at 07:45 hours on Sunday January 11th, 2015 for assignment in B Platoon Squad 1.

[REDACTED]

[REDACTED]

Will leave B Platoon Squad 3 on Sunday January 4th, 2015 at 23:59 hours and he will report to Lieutenant Don Cinque at 15:45 hours on Monday January 5th, 2015 for assignment in C Platoon Squad 3.

[REDACTED]

[REDACTED]

Will leave A Platoon Squad 1 on Friday January 2nd, 2015 at 23:59 hours and will report to Lieutenant Don Cinque at 15:45 hours on Saturday January 3rd, 2015 for assignment in C Platoon Squad 1.

[REDACTED]

[REDACTED]

Will leave A Platoon Squad 2 on Tuesday January 6th, 2015 at 23:59 hours and will report to Lieutenant Don Cinque at 15:45 hours on Wednesday January 7th, 2015 for assignment in C Platoon Squad 2.

[REDACTED]

[REDACTED]

Will leave C Platoon Squad 2 on Thursday January 1st, 2015 at 23:59 hours and will report to Lieutenant Don Cinque at 15:45 hours on Saturday 3rd, 2015 for assignment in C Platoon Squad 1. He will be granted an RDO on Friday January 2nd, 2015.

[REDACTED]

[REDACTED]

Will leave B Platoon Squad 1 on Saturday January 2nd, 2015 at 23:59 hours and will report to Lieutenant Steve Hauck at 07:45 hours on Sunday January 3rd, 2015 for assignment in B Platoon Squad 2.

[REDACTED] Will leave C Platoon Squad 3 on Sunday January 4th, 2015 at 23:59 hours and will report to Lieutenant Steve Hauck at 07:45 hours on Monday January 5th, 2015 for assignment in B Platoon Squad 3.

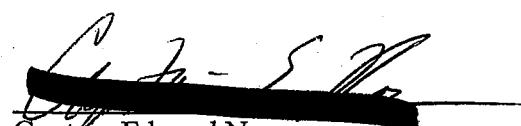
[REDACTED] Will leave C Platoon Squad 2 on Monday January 5th, 2015 at 23:59 hours and will report to Lieutenant Charles Kelly at 23:45 hours on Tuesday January 6th, 2015 for assignment in A Platoon Squad 2.

[REDACTED] Will leave A Platoon Squad 2 on Saturday January 3rd, 2015 at 23:59 hours and will report to Lieutenant Charles Kelly at 23:45 hours on Sunday January 4th, 2015 for assignment in A Platoon Squad 1.

[REDACTED] Will leave C Platoon Squad 3 on Monday January 5th, 2015 at 23:59 hours and will report to Lieutenant Don Cinque at 15:45 hours on Tuesday January 6th, 2015 for assignment in C Platoon Squad 2.

[REDACTED] Will leave A Platoon Squad 1 on Thursday January 1st, 2015 at 23:59 hours and will report to Lieutenant Charles Kelly at 23:45 hours on Saturday January 2nd, 2015 for assignment in A Platoon Squad 3.

[REDACTED] Will leave C Platoon Squad 2 on Monday January 5th, 2015 at 23:59 hours and will report to Lieutenant Charles Kelly at 23:45 hours on Tuesday January 6th, 2015 for assignment in A Platoon Squad 2.


Captain Edward Noonan
Uniformed Patrol Division

UTICA POLICE DEPARTMENT

Personnel Order



Issue date:
19 December 2011

Subject: Assignment / Transfer
Orders

P.O. 2011-44

Issuing Authority
Capt. W. Manolescu

Approved by:
Chief Mark Williams

Officer G. Taurisani.....Will leave Logistics 20 December 2011. He will report to Lt. Dodge 2345 hours on 20 September 2011 for Light Duty assignment in Platoon A Squad 2.

Captain Wayne Manolescu
Support Division Commander

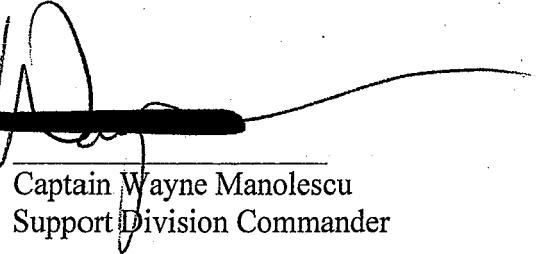
UTICA POLICE DEPARTMENT

Personnel Order



| | | |
|---|--|--------------|
| Issue date: 4 November 2011 | Subject: Assignment / Transfer Orders | P.O. 2011-40 |
| Issuing Authority Capt. W. Manolescu | Approved by: Chief Mark Williams | |

Officer G. Taurisani..... Will leave A Platoon 4 November 2011. He will be assigned to Lt. L. Cozza 07:45 hours 4 November 2011 for assignment in the Logistics and Resources Unit.



Captain Wayne Manolescu
Support Division Commander

UTICA POLICE DEPARTMENT

Personnel Order



| | | |
|-----------------------------------|--|-------------|
| Issue date: 4 July 2008 | Subject: Assignment / Transfer Orders | P.O.08 - 13 |
| Captain C. Stephens | Approved by: Chief Daniel LaBella | |

[REDACTED] Will leave Platoon C Squad 1 on 13 July 2008. He will report to Lieutenant L. Capri at 23:45 13 July 2008 for assignment in Platoon A Squad 1 on 14 July 2008.

[REDACTED] Will leave Platoon B Squad 3 on 14 July 2008. He will report to Lieutenant L. Capri at 23:45 14 July 2008 for assignment in Platoon A Squad 1 on 15 July 2008.

[REDACTED] Will leave Platoon B Squad 1 on 13 July 2008. He will report to Lieutenant L. Capri at 23:45 13 July 2008 for assignment in Platoon A Squad 1 on 14 July 2008.

Officer G. Taurisani Will leave Platoon C Squad 2 on 11 July 2008. He will report to Lieutenant L. Capri at 23:45 11 July 2008 for assignment in Platoon A Squad 2 on 12 July 2008.

[REDACTED] Will leave Platoon B Squad 2 on 10 July 2008. He will report to Lieutenant W. Manolescu at 15:45 11 July 2008 for assignment in Platoon C Squad 1.

[REDACTED] Will leave Platoon B Squad 2 on 10 July 2008. He will report to Lieutenant L. Capri at 23:45 10 July 2008 for assignment in Platoon A Squad 1 on 11 July 2008.

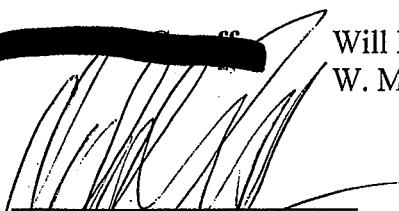
[REDACTED] Will leave Platoon A Squad 1 on 13 July 2008. He will report to Lieutenant W. Manolescu at 15:45 14 July 2008 for assignment in Platoon C Squad 1.

[REDACTED] Will leave Platoon A Squad 2 on 11 July 2008. He will report to Lieutenant W. Manolescu at 15:45 12 July 2008 for assignment in Platoon C Squad 3.

[REDACTED] Will leave Platoon B Squad 1 on 13 July 2008. He will report to Lieutenant W. Manolescu at 15:45 14 July 2008 for assignment in Platoon C Squad 1.

[REDACTED] Will leave Platoon B Squad 3 on 15 July 2008. He will report to Lieutenant W. Manolescu at 15:45 16 July 2008 for assignment in Platoon C Squad 3.

[REDACTED] Will leave Platoon A Squad 3 on 9 July 2008. He will report to Lieutenant W. Manolescu at 15:45 10 July 2008 for assignment in Platoon C Squad 1.


Captain Clayton Stephens
Uniform Division Commander

UTICA POLICE DEPARTMENT

Personnel Order



| | | |
|----------------------------|--|-------------|
| Issue date: 6 June 2008 | Subject: Assignment / Transfer Orders | P.O.08 - 07 |
| Captain C. Stephens | Approved by: Chief Daniel LaBella | |

[REDACTED] Will leave Platoon A on 10 June 2008. He will report to Lieutenant M. Bailey at 07:45 11 June 2008 for assignment in Platoon B Squad 1.

[REDACTED] Will leave Platoon A on 10 June 2008. He will report to Lieutenant W. Manolescu at 15:45 11 June 2008 for assignment in Platoon C Squad 1.

[REDACTED] Will leave Platoon B on 10 June 2008. He will report to Lieutenant W. Manolescu at 15:45 11 June 2008 for assignment in Platoon C Squad 1.

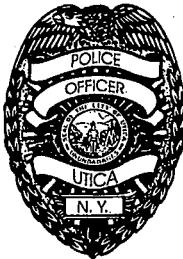
[REDACTED] Will leave Platoon B on 10 June 2008. He will report to Lieutenant J. Watson at 23:45 10 June 2008 for assignment in Platoon A Squad 1 on 11 June 2008.

[REDACTED] Will leave Platoon C on 11 June 2008. He will report to Lieutenant J. Watson at 23:45 11 June 2008 for assignment in Platoon A Squad 1 on 12 June 2008. (June 12 is Platoon A Squad 1's training day, Officer Seferagic will report for in-service training at 0830 on the 12th.)

[REDACTED] Will leave Platoon C on 10 June 2008. He will report to Lieutenant M. Bailey at 07:45 11 June 2008 for assignment in Platoon B Squad 1.

[REDACTED] Will leave Platoon A on 9 June 2008. He will report to Lieutenant M. Bailey at 07:45 10 June 2008 for assignment in Platoon B Squad 2.

[REDACTED] Will leave Platoon B on 9 June 2008. He will report to Lieutenant J. Watson at 23:45 on 9 June 2008 for assignment in Platoon A Squad 2 on 10 June 2008. (June 10 is Platoon A Squad 2's training day, Officer Ellis will report for in-service training at 0830 on the 10th.)

UTICA POLICE DEPARTMENT**Personnel Order**

| | | |
|-----------------------------------|--|-------------|
| Issue date: 6 June 2008 | Subject: Assignment / Transfer Orders | P.O.08 - 07 |
| Captain C. Stephens | Approved by: Chief Daniel LaBella | |

Officer G. Taurisani

Will leave Platoon B on 8 June 2008. He will report to Lieutenant W. Manolescu at 15:45 on 9 June 2008 for assignment in Platoon C Squad 2.

[REDACTED]

Will leave Platoon C on 9 June 2008. He will report to Lieutenant M. Bailey at 07:45 10 June 2008 for assignment in Platoon B Squad 2.

[REDACTED]

Will leave Platoon A on 9 June 2008. He will report to Lieutenant M. Bailey at 07:45 10 June 2008 for assignment in Platoon B Squad 3.

[REDACTED]

Will leave Platoon B on 9 June 2008. He will report to Lieutenant J. Watson at 23:45 9 June 2008 for assignment in Platoon A Squad 3 on 10 June 2008.

[REDACTED]

Will leave Platoon B on 8 June 2008. He will report to Lieutenant W. Manolescu at 15:45 9 June 2008 for assignment in Platoon C Squad 3. (June 9 is Platoon C Squad 3's training day, Officer Antanasoff will report for in-service training at 0830 on the 9th.)

[REDACTED]

Will leave Platoon C on 8 June 2008. He will report to Lieutenant M. Bailey at 07:45 9 June 2008 for assignment in Platoon B Squad 3.

[REDACTED]

Captain Clayton Stephens
Uniform Division Commander

UTICA POLICE DEPARTMENT

Personnel Order



| | | |
|-------------------------------------|---|-------------|
| Issue date: 10 April 2008 | Subject: Assignment / Transfer Orders | P.O.08 - 05 |
| Captain C. Stephens | Approved by: Chief C. Allen Pylman | |

[REDACTED]

Will leave Support Division on 11 April 2008. He will report to Lieutenant J. Watson at 23:45 11 April 2008 for assignment in Platoon A Squad 3 on 12 April 2008.

[REDACTED]

Will leave Support Division on 13 April 2008. He will report to Lieutenant J. Watson at 23:45 13 April 2008 for assignment in Platoon A Squad 1 on 14 April 2008.

[REDACTED]

Will leave Support Division on 13 April 2008. He will report to Lieutenant J. Watson at 23:45 13 April 2008 for assignment in Platoon A Squad 1 on 14 April 2008.

[REDACTED]

Will leave Support Division on 12 April 2008. He will report to Lieutenant W. Manolescu at 15:45 13 April 2008 for assignment in Platoon C Squad 2

Officer G. Taurisani

Will leave Support Division on 12 April 2008. He will report to Lieutenant M. Bailey at 07:45 13 April 2008 for assignment in Platoon B Squad 2.

[REDACTED]

Will leave Support Division on 12 April 2008. He will report to Lieutenant M. Bailey at 07:45 13 April 2008 for assignment in Platoon B Squad 3.

[REDACTED]

Will leave Support Division on 13 April 2008. He will report to Lieutenant M. Bailey at 07:45 14 April 2008 for assignment in Platoon B Squad 1.

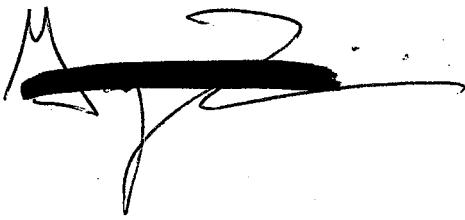


MEMORANDUM

TO: OFFICER GARY TAURISANI
FROM: LIEUTENANT STEVE HAUCK
SUBJECT: INVESTIGATOR PAY
DATE: MARCH 4, 2015

This memorandum is to inform you that per city legislation created by the Common Council in March of 2012, a complement of 21 permanent investigators have been reached. All investigators (permanent and temporary) assigned to those positions receive investigator pay at a rate of 4 % annually. Any additional personnel assigned to investigators positions, do so on a temporary basis without the 4 % compensation.

Any officer who does not wish to serve in these positions without the compensation, can at any time, and without repercussions, opt out, and return to the patrol division.

A handwritten signature consisting of stylized initials and a surname, with a thick black horizontal line obscuring the middle portion of the signature.

#8377

3-10-15

FILE COPY

Chief Labella,

I Officer Gary Taurisani at this time am respectfully requesting your approval to seek secondary employment with the Utica City School District, as a security officer.

Respectfully,

Gary Taurisani
Patrolman #8377

M J #8377



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: *Gary N. Taurisani*

Address: [REDACTED]

Telephone: *N/A*

has this day been appointed to the position of Police Officer

in the department of Public Safety- Bureau Of Police

the term to commence October 15, 2007

the term to end N/A

filling unexpired term of (if applicable)

Signed

Mayor

Title of Official

Thursday, October 20, 2016

Chief Mark Williams
Utica Police Department
413 Oriskany Blvd.
Utica, NY 13502

From: ██████████ - Case #UTIP:201639219 - Incident # 2016000049618

Dear Chief Williams:

The purpose of this letter is to share with you a very positive experience my husband and I had with contacting the Utica Police on Sunday October 9th during one of the most frightening experiences we have had since moving back to my home town of Utica 14 years ago.

About 4:30 a.m. Sunday morning October 9th my husband was awakened by a strange sounding noise at first he could not tell where the noise was coming from and he thought it might be that an animal had gotten in the house – my husband is a cancer survivor but has heart issues stemming from chemo therapy treatments and is not in the best of health.

He could see that our bathroom door (right off our bedroom) was closed and he knew he did not close it. He could now hear some noise coming from that room he forced open the door open up against a small built man wearing a black hoodie which was hanging very low – he could not see the man's face he grabbed him by the arm. At this point I awakened and go right up and saw my husband holding this man's arm and escorting him out toward our dining room the man broke loose of my husband's grip on his arm and we couldn't see exactly where he went but he was headed toward the kitchen - one of the ways out of the house is through the door to our kitchen which leads to both our cellar and outside side entrance door. I always check all three doors leading to the outside of our house for some reason that night I was extra tired and must have forgotten to lock the side entrance door!

We called 911 and explained the situation they summoned the police for us and stayed on the phone with us until the officers came (which was very quickly) and checked the outside of the house and then came to our front door. There were 2 officers that came initially I wish I could have gotten their names one male and one female they were so nice and calming and reassuring. I told them I was concerned that the man may have gone down into the basement. They called for another officer to come which he did right away and gun in hand he checked our basement. Thank God no one was there.

We found a screw driver in the driveway next to one of the basement windows and noticed the screen was cut. We didn't notice anything missing in our house at that point.

That evening my husband was suffering from terrible leg cramps and I went in the bathroom to get one of his muscle relaxer pills and noticed the bottle was empty, then I checked his nausea pill bottle it was empty, same thing with his anti-anxiety and pain pills. I just couldn't believe it the man must have been after his drugs! I called the police dept. back and told them what happened and they sent Officer Schiavi (not sure if I am spelling this correctly) to take photos of the bottles and he checked for finger prints on the drawer where the pill were stored. He was very polite and understanding of all that happened to us.

Carrie Helig
Eric Weir

Joshua Harrington
Matthew Schiavi
Admir Gracanin

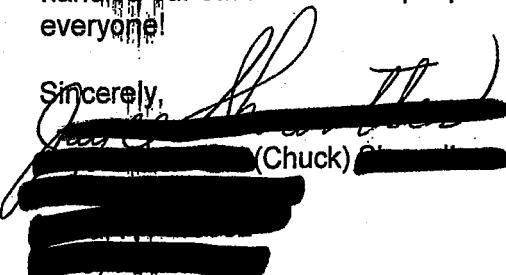
I needed to get a copy of the police report to help me be able to replace my husband's prescriptions and I ended up speaking with Investigator Gary Taurisani from the Burglary unit. He was a tremendous help in reaching the goal of getting this report in my hands. When I arrived at the records department and learned that the report had not yet been completed Investigator Taurisani took it upon himself to make sure it was completed and delivered a copy to me the same day! I was so thrilled that now I could complete the task of getting my husband's prescriptions replaced we were leaving for a trip to visit my elderly Uncle in Poughkeepsie NY in 4 days and I didn't want him to be without his medicine.

I wanted to take the time to congratulate you on the swiftness of action that took place and the compassion and professionalism that we were shown by your team members.

We are very grateful that no one was hurt and that we were able to retrieve his medicine in a timely manner thanks to everyone who worked with us.

I hope you will share this letter with whoever is responsible for the wonderful people who handled our case and all the people involved that came to our aid we are so grateful to everyone!

Sincerely,


(Chuck)

State of New York

Division of Criminal Justice Services

Hereby Acknowledges and Declares that

Gary Taurisani

has attended the

Interview and Interrogation Course

given under the auspices of the

**NYS Division of Criminal Justice Services
Utica, New York
March 18 - 19, 2015**



A handwritten signature in black ink.

Michael R. Wood
Deputy Commissioner

UTICA POLICE DEPARTMENT

Mayor Robert Palmieri

Chief Mark W. Williams

LETTER FOR FILE

**OFFICER PATRICK MURPHY, OFFICER KEVIN STRIFE
OFFICER GARY TAURISANI, OFFICER ERIC WEIR**

On December 19, 2013 at approximately 0511 hours, Officers Murphy, Strife, Taurisani and Weir were dispatched to the 700 block of Lansing Street regarding a burglary in progress. Upon the officers arrival, they located an open window in the rear of the residence with a ladder propped up to the window. Officers set up a perimeter around the residence while Officer Taurisani spoke with the caller. The caller told Officer Taurisani that her upstairs neighbor was out of town and left her house keys with the caller to keep an eye on things while she was gone. The caller said that she heard someone walking around the apartment above her and knew that no one was supposed to be there so she called the police. She then provided Officer Taurisani with the key to her neighbor's apartment.

Officers Taurisani and Strife made entry into the apartment in an attempt to locate any parties. While they were clearing the apartment, they heard someone running. Officer Strife then observed a male running toward the front of the apartment where Officers Murphy and Weir were on the perimeter. The suspect was found to be in possession of the resident's property and was subsequently charged with burglary.

Due to the officers quick response, good communication and teamwork, a burglary suspect was apprehended and the victim's property was recovered. These officers bring honor to themselves and to the Utica Police Department.

Dated: May 22, 2014



Mark W. Williams
Chief of Police

Utica Police Department

UTICA, NEW YORK



Certificate of Commendation EXCEPTIONAL DUTY

Awarded to

POLICE OFFICER GARY LAURISANI

On Monday November 26, 2012 at approximately 0215 hours, several officers responded to a larceny that had just occurred at a store in the south Utica area. A description of the suspect was given out and the officers located the suspect near where the larceny had occurred. Upon attempting to detain the suspect, he pulled out a knife and threatened the officers, telling them they would need their gun to stop him or he would kill one of them. The suspect then started to walk away and the officers followed him on foot in an attempt to get him to put the knife down. The suspect continued to wave the knife at all the officers while continuing to walk away from them. Several attempts were made to utilize LASERS to take the suspect into custody but the attempts were unsuccessful. The officers followed the suspect for several blocks in an attempt to contain him and keep him from harming any officers, civilians or himself but the suspect continued through several streets and yards until he was cornered in a fenced area of a local Nursing Home. The suspect repeatedly threatened the officers with the knife, refusing to drop it. Due to the location and backdrop, it was not possible for the officers to use their firearms against the suspect, even though they were being threatened by the suspect with deadly force. An attempt was made to utilize pepper spray, but that had no effect on the suspect. After a standoff that lasted approximately 45 minutes, one of the officers used a less lethal shotgun, firing bean bag rounds and rubber bullets at the suspect, striking him. The suspect then dropped the knife and the officers were able to safely take the suspect into custody. He was subsequently charged with and pled guilty to several felony counts.

Due to the officers' quick response, dedication to work and innovative thinking, a dangerous suspect was apprehended and a weapon was taken off the streets. These Officers bring honor to themselves and the department.

Dated: May 24, 2013

Mark W. Williams, Chief of Police

Utica Police Department

UTICA, NEW YORK



Certificate of Commendation HONORABLE SERVICE

Awarded to

POLICE OFFICER GARY TAURISANI

In the evening of Sunday, January 29, 2012, a call was given out regarding a burglary in progress in the Cornhill area. Upon arrival, Officer Parrotta located several people in the area where the incident had occurred. The officer observed a white male walking towards the alley of the residence at a quick pace. A witness yelled out that the male walking away from the scene was the suspect and that he had a weapon on him. The suspect began to run as he turned a corner on the side of the house whereupon Officer Parrotta began a foot pursuit.

While pursuing the suspect, he threw an item to the right of the alley way. The Officer was able to catch up to the suspect and began a struggle in an attempt to detain him. Officers Taurisani and Murphy arrived to assist in detaining the suspect. Once in custody, a search of the area was conducted in an attempt to locate the item that was thrown by the suspect. A sawed off shotgun was located on the ground by Officer Taurisani.

Due to the officers quick response, attention to detail and dedication to work, a dangerous suspect was apprehended and a weapon was taken off the streets. These officers bring honor to themselves and to the Utica Police Department.

Dated: May 25, 2012

Mark W. Williams, Chief of Police

STATE OF NEW YORK

FIRE TRAINING CERTIFICATE

This is to attest that

GARY TAURISANI

is hereby awarded this certificate signifying the completion of

Chemical Suicide: Information for the Emergency Responder

in the standardized fire training program, totaling 2 hours of instruction.

Attained this date APRIL 11, 2012



John P. Coughlin
GOVERNOR
STATE OF NEW YORK

STATE FIRE INSTRUCTOR

OFFICE OF FIRE PREVENTION AND CONTROL

John P. Coughlin
GOVERNOR
STATE OF NEW YORK

State of New York

Division of Criminal Justice Services

Municipal Police Training Council

Hereby Acknowledges and Declares that

Gary Tannani

has successfully completed the

Police Field Training Officer Course

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

Mohawk Valley Police Academy
Utica, New York
March 26-29, 2011

Ronald G. Spike

Ronald G. Spike
Chairman
Municipal Police Training Council

Tony Perez
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

Gary N. Taurisani

has successfully completed the

Conducted Energy Device Course - Equivalency

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

This Certificate Awarded June 24, 2010
at Utica, New York

EXCELSIOR

Thomas Belfiore

Thomas Belfiore
Chairman
Municipal Police Training Council

Tony Perez
Tony Perez
Deputy Commissioner
Division of Criminal Justice Services

**NEW YORK STATE
DEPARTMENT OF HEALTH**

This Permit Certifies That
GEDDES, JR., SAMUEL M.

Permit Number 32014

Breath Analysis Operator Certified in
THE CHEMICAL ANALYSIS OF A PERSON'S BREATH

Period From 01/01/2010 - Period To 01/01/2012

Continuously Certified Since 01/24/2002

Wadsworth Center for Laboratories and Research
DOH-2147a (01/2001)

**NEW YORK STATE
DEPARTMENT OF HEALTH**

This Permit Certifies That
SINGE, DAVID

Permit Number 38310

Breath Analysis Operator Certified in
THE CHEMICAL ANALYSIS OF A PERSON'S BREATH

Period From 01/01/2010 - Period To 01/01/2012

Continuously Certified Since 03/14/2008

Wadsworth Center for Laboratories and Research
DOH-2147a (01/2001)

**NEW YORK STATE
DEPARTMENT OF HEALTH**

This Permit Certifies That
LEWIS, SCOTT M.

Permit Number 30775

Breath Analysis Operator Certified in
THE CHEMICAL ANALYSIS OF A PERSON'S BREATH

Period From 01/01/2010 - Period To 01/01/2012

Continuously Certified Since 02/18/2000

Wadsworth Center for Laboratories and Research
DOH-2147a (01/2001)

**NEW YORK STATE
DEPARTMENT OF HEALTH**

This Permit Certifies That
LAURISI, GARY N.

Permit Number 38311

Breath Analysis Operator Certified in
THE CHEMICAL ANALYSIS OF A PERSON'S BREATH

Period From 01/01/2010 - Period To 01/01/2012

Continuously Certified Since 12/11/2008

Wadsworth Center for Laboratories and Research
DOH-2147a (01/2001)

**NEW YORK STATE
DEPARTMENT OF HEALTH**

This Permit Certifies That
TOOMEY, JOHN J.

Permit Number 20449

Breath Analysis Operator Certified in
THE CHEMICAL ANALYSIS OF A PERSON'S BREATH

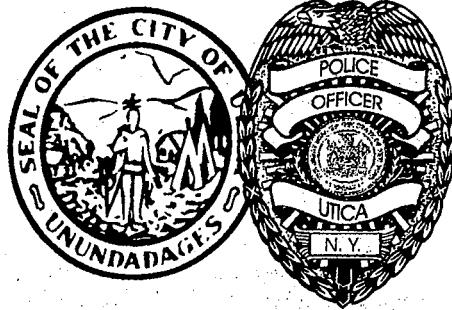
Period From 01/01/2010 - Period To 01/01/2012

Continuously Certified Since 14/22/1988

Wadsworth Center for Laboratories and Research
DOH-2147a (01/2001)

Utica Police Department

UTICA, NEW YORK



Certificate of Commendation HONORABLE SERVICE

Awarded to

POLICE OFFICER GARY TAURISANI

On March 18th, 2011 at approximately 0310 hours, a call was given out regarding a domestic incident. Upon their arrival at an east Utica location, Officers Parrotta and Taurisani were met out front by the victim and were escorted inside her apartment to locate the suspect. Once entering the apartment, the officers located the suspect and placed him into handcuffs regarding the domestic and for possessing marijuana which he had in his hand. While searching the suspect, a magazine with several small caliber rounds was located. The suspect stated that he had a handgun in his bedroom and consent was given to search but while attempting to search the room, the suspect began to move his lower body and squirm. The officers began to struggle with the suspect and after a search of the suspect, a small black colored handgun was located.

Due to the officers quick response, attention to detail and dedication to work, a dangerous suspect was apprehended and a weapon was taken off the street. These officers bring honor to themselves and the department.

Dated: May 20, 2011

A handwritten signature in cursive ink, appearing to read "Mark W. Williams".

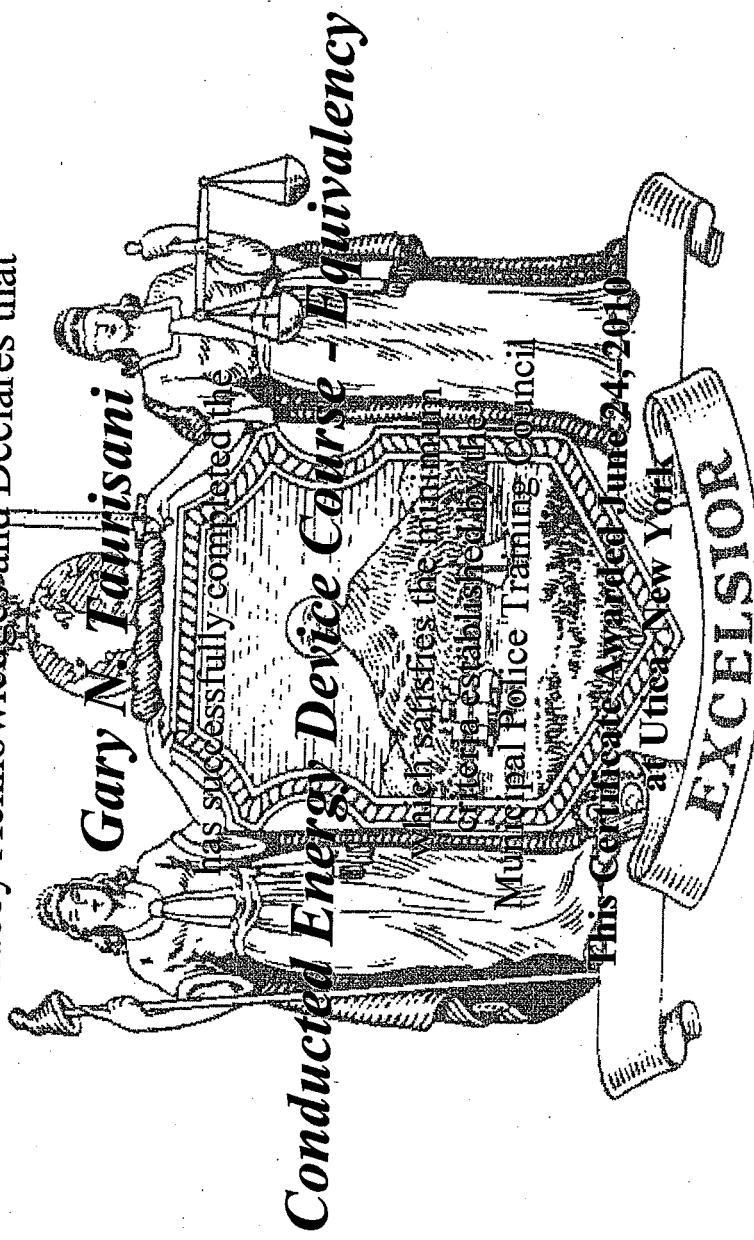
Mark W. Williams
Chief of Police

State of New York

Division of Criminal Justice Services

Municipal Police Training Council

Hereby Acknowledges and Declares that



Gary N. Taurisani
has successfully completed the
Conducted Energy Device Course - Equivalency

This Course was awarded June 24, 2010

at Utica, New York

EXCELSIOR

Thomas Belfiore
Chairman
Municipal Police Training Council

Tony Perez
Deputy Commissioner
Division of Criminal Justice Services

State of New York

Division of Criminal Justice Services

Hereby Acknowledges and Declares that

Daniel Taurisano

Has attended the

Property/Evidence Room Management Course

given under the auspices of
the

Division of Criminal Justice Services

Utica, New York

October 27-28, 2009

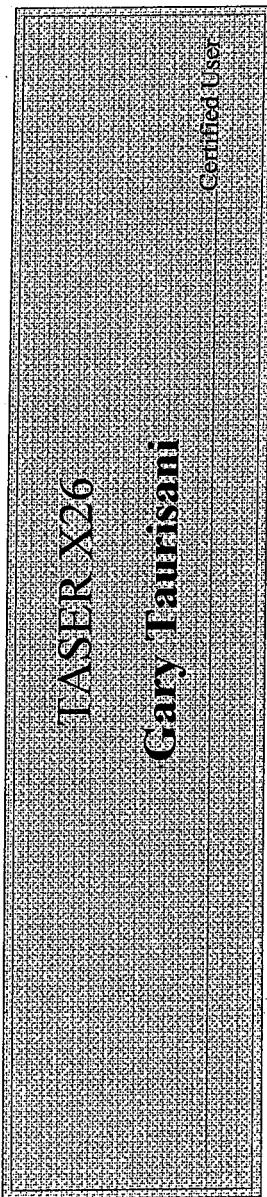
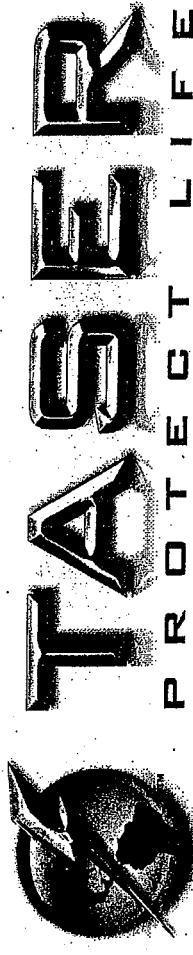
EXCELSIOR

J. Bilich

John Bilich
Deputy Commissioner
Division of Criminal Justice Services

Denise E. O'Donnell

Denise E. O'Donnell
Commissioner
Division of Criminal Justice Services



This Certifies that

Gary Taurisani

*is trained in the proper and safe use of the TASER® X26 Electronic Control Device
and has passed the requirements of the Utica Police Department TASER X26 training program under the supervision of a
Certified Instructor.*

In Witness Whereof, Certified Instructor

Sergeant Michael Hauck
has certified the successful completion of the training requirements this day:

6/17/09

Certified Instructor:

Sgt. Michael Hauck

Certified Instructor ID:

021219405121412871346C

New Mexico Tech

ENERGETIC MATERIALS RESEARCH AND TESTING CENTER

Gary N. Taurisani

Is hereby awarded this certificate and .4 continuing education units
for successfully completing the 4 hour

Incident Response to Terrorist Bombings
Awareness Level Training Course

January 30, 2009 - January 30, 2009



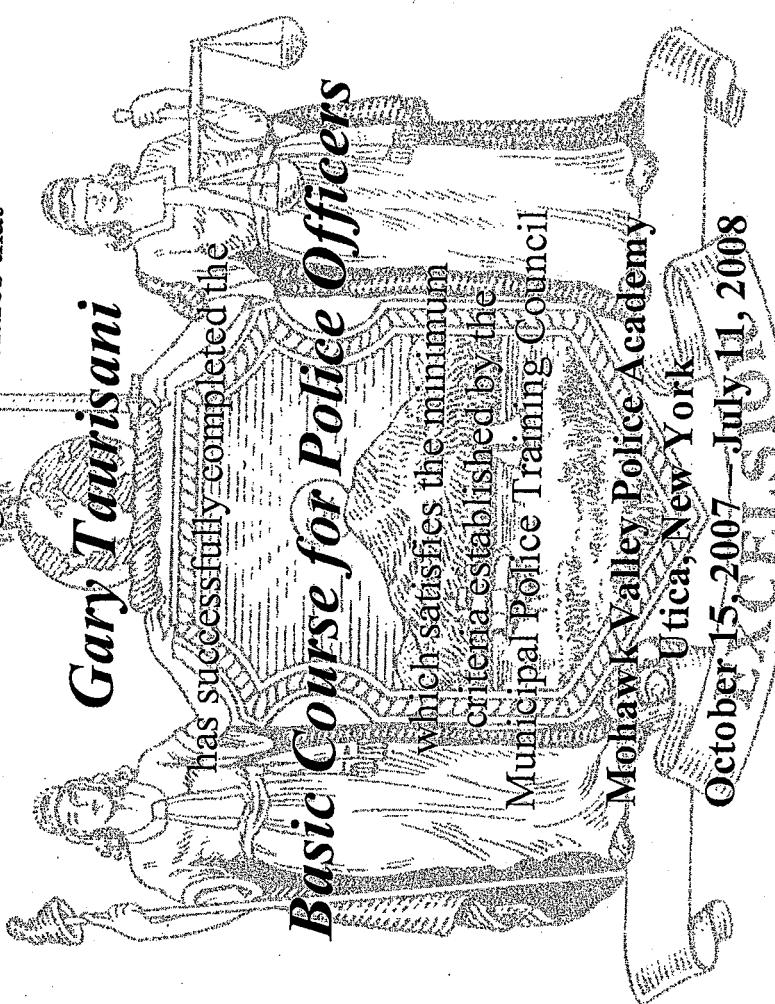
Pam Henley
Associate Director/Program Manager

State of New York

Division of Criminal Justice Services

Municipal Police Training Council

Hereby Acknowledges and Declares that



Denise E. O'Donnell

Denise E. O'Donnell
Commissioner
Division of Criminal Justice Services

Thomas Belliore

Thomas Belliore
Chairman
Municipal Police Training Council

John Billich

John Billich
Deputy Commissioner
Division of Criminal Justice Services

STATE

GARY TAURISANI

as comprising the Municipal Police Training Council
RADAR / LIDAR OPERATOR COURSE
The Division of Criminal Justice Services, with the general advice of the
municipal Police Training Council, is authorized by Executive Law §84(5) to issue
appropriate certificates to police officers and peace officers for advanced in-service
training programs. This card should be deemed valid only when presented by a duly
appointed police or peace officer.

Maria E. O'Donnell
Commissioner
Division of Criminal Justice Services

State of New York

Division of Criminal Justice Services

Municipal Police Training Council

Hereby Acknowledges and Declares that

Gary Taurisani

has successfully completed the

Radar/Lidar Operator Course

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

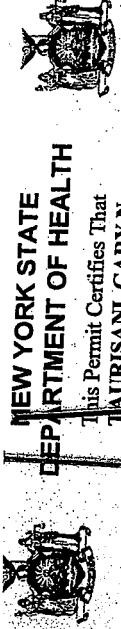
Mohawk Valley Police Academy
Utica, New York
February 29 - March 5, 2008

Denise E. O'Donnell
Denise E. O'Donnell
Commissioner
Division of Criminal Justice Services

Thomas Belfiore
Thomas Belfiore
Chairman
Municipal Police Training Council

John Bilich
John Bilich
Deputy Commissioner
Division of Criminal Justice Services

Jill Beld



NEW YORK STATE
DEPARTMENT OF HEALTH

This Permit Certifies That
TAURISANI, GARY N.

Permit Number 38311
is a Breath Analysis Operator Certified in
THE CHEMICAL ANALYSIS OF A PERSON'S BREATH.

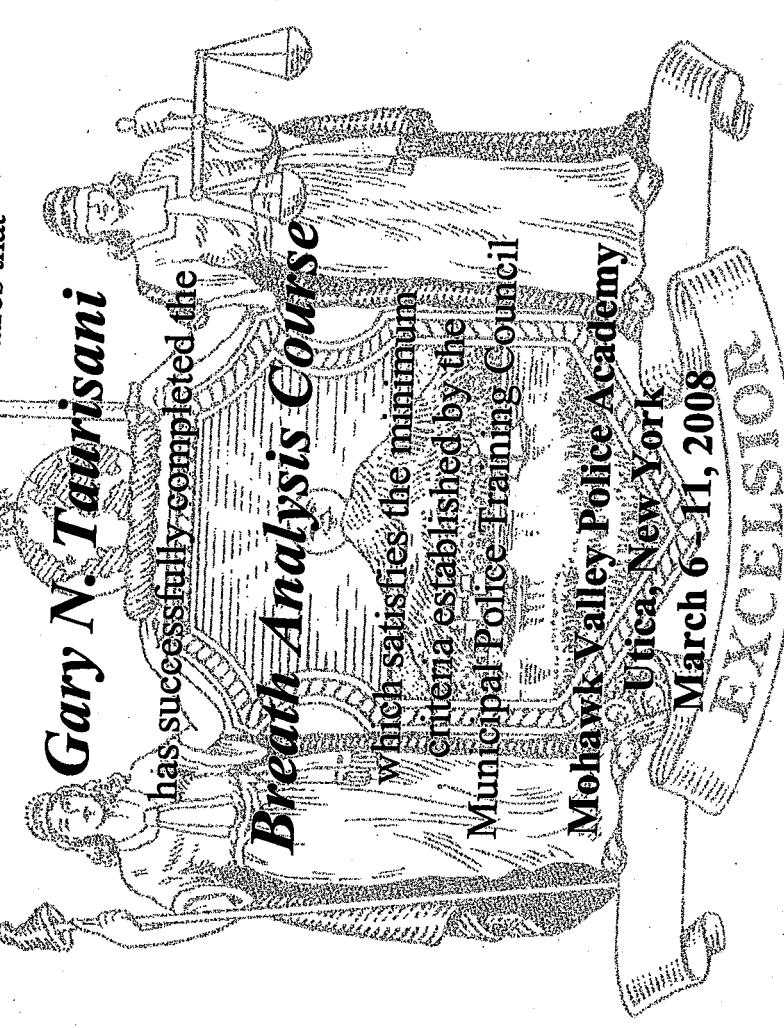
Period From 03/1/2008 Period To 03/11/2010
Continuously Certified Since 03/11/2008
Wadsworth Center for Laboratories and Research
DOH-2147-a (01/2001)

State of New York

Division of Criminal Justice Services

Jail Police Training Council

Hereby Acknowledges and Declares that



Gary N. Taurisani

has successfully completed the

Breath Analysis Course

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

Mohawk Valley Police Academy

Utica, New York

March 6 - 11, 2008

Denise E. O'Donnell

Denise E. O'Donnell
Commissioner
Division of Criminal Justice Services

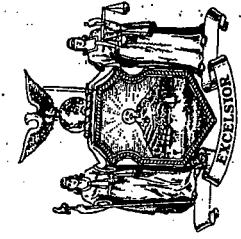
Thomas Befire

Thomas Befire
Chairman
Municipal Police Training Council

John Bilich

John Bilich
Deputy Commissioner
Division of Criminal Justice Services

New York State
Commission of Correction



Albany

New York

This Certifies That

Gary Taurisani

Has satisfactorily completed 8 hours of

Suicide Prevention/Crisis Intervention

training sponsored by the New York State
Commission of Correction and, therefore, is awarded this diploma.
Given this 8th day of April in the year two thousand eight.

D. L. Stewart
Daniel L. Stewart, Chairman
Commission of Correction

Donald R. Nadler
Donald R. Nadler
Deputy Director

Utica Police Department

Professional Standards

Officer Disciplinary History

Police Officer Gary N Taurisani [8377/2007000000032]

Part I - Personal Information

Name: Police Officer Gary N Taurisani
: 2007000000032 Badge No: 8377 Hire Dt: 10/16/2007

Department: Criminal Investigation Division

Bureau: Criminal Investigations

Division: Criminal Investigations

Part II - Discipline History

No Disciplinary Record

Printed: May 24, 2021 13:25 By: Sgt Hiram Rios

Concise Officer History**Police Officer Gary N Taurisani [8377/2007000000032]**

: 2007000000032 Hire date: Oct 16, 2007
Current assignment(s):

Department: Criminal Investigation Division
Bureau: Criminal Investigations
Division: Criminal Investigations

Report summary: totals by incident type:

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

Printed: May 24, 2021 13:26 By: Sgt Hiram Rios

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|--------------------------|-------------|----------------|--------------|-----------------|-----------------|---|
| 2013000000065 | November 2013 In Service | In Service | 0.00 | 8.00 | | | Infectious Disease Sgt. Shaffer RCIL Use of Force Lt. Brucker |

Course Schedule

| <u>Schedule</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|------------------------|----------------------|----------------|
| | 11/05/2013 08:30 | 11/05/2013 16:30 | |
| | 11/07/2013 08:30 | 11/07/2013 16:30 | |
| | 11/15/2013 08:00 | 11/15/2013 16:00 | |
| | 11/19/2013 08:00 | 11/19/2013 16:00 | |
| | 11/21/2013 08:00 | 11/21/2013 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|------------------------------|-------------|--|--|
| 2012000000044 | 2012 June Roll Call Training | In Service | Credits 0.00 Hours 0.25 <u>Course 1</u> <u>Course 2</u> | June Roll Call Training "Sharps Container" |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 06/20/2012 11:45 | 06/20/2012 11:59 | |
| | | 06/23/2012 11:45 | 06/23/2012 11:59 | |
| | | 06/25/2012 11:45 | 06/25/2012 11:59 | |
| | | 06/26/2012 11:45 | 06/26/2012 11:59 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> |
|------------------|------------------------------------|-----------------|------------------------|
| 2012000000032 | 2012 MAY Roll Call Pursuit Driving | In Service | |
| Credit(s) | Hours | <u>Course 1</u> | <u>Course 2</u> |
| 0.00 | 0.25 | | Sgt Murphy out injured |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 05/10/2012 08:45 | 05/10/2012 08:59 | | |
| | | 05/11/2012 23:45 | 05/11/2012 23:59 | | |
| | | 05/12/2012 23:45 | 05/12/2012 23:59 | | |
| | | 05/14/2012 23:45 | 05/14/2012 23:59 | | |
| | | 05/15/2012 23:45 | 05/15/2012 23:59 | | |
| | | 05/17/2012 18:45 | 05/17/2012 18:59 | | |
| | | 05/20/2012 08:45 | 05/20/2012 08:59 | | |
| | | 05/21/2012 08:45 | 05/21/2012 08:59 | | |
| | | 05/22/2012 08:45 | 05/22/2012 08:59 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---------------------------------|-------------|----------------|--------------|----------------------|--|
| 2013000000009 | 2013 Feb In-Service Instruction | In Service | 0.00 | 8.00 | | Legal Updates-Lt Cifonelli and Lt Dodge Corporation Council-Andrew Bourgham Lawman Training-Jeff Foley |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 02/06/2013 08:00 | 02/06/2013 16:00 | | |
| | | 02/08/2013 08:00 | 02/08/2013 16:00 | | |
| | | 02/20/2013 08:00 | 02/20/2013 16:00 | | |
| | | 02/22/2013 08:00 | 02/22/2013 16:00 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|-------------------------|-------------|---|--|
| | | In Service | <u>Credits</u> <u>Hours</u> <u>Course 1</u> <u>Course 2</u> | |
| 2013000000002 | 2013 January In-Service | | 0.00 8.00 | Topics: Training Updates Workplace Violence-Trish City Marshall-Tom Allard Domestic Violence-Po Ashley Berger/Inv Shanley |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 01/07/2013 08:00 | 01/07/2013 16:00 | |
| | | 01/09/2013 08:00 | 01/09/2013 16:00 | |
| | | 01/10/2013 16:00 | 01/10/2013 17:00 | |
| | | 01/11/2013 08:00 | 01/11/2013 16:00 | |
| | | 01/15/2013 08:00 | 01/15/2013 16:00 | |
| | | 01/17/2013 08:00 | 01/17/2013 16:00 | |
| | | 01/25/2013 08:00 | 01/25/2013 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|------------------------|-------------|----------------|----------------------------------|-----------------|
| 2013000000008 | 2013 January Roll Call | In Service | 0.00 | Hours <u>Course 1</u> 0.25 | <u>Course 2</u> |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 01/19/2013 07:45 | 01/19/2013 07:59 | | -- |
| | | 01/20/2013 11:45 | 01/20/2013 11:59 | | -- |
| | | 01/21/2013 07:45 | 01/21/2013 07:59 | | -- |
| | | 01/23/2013 11:45 | 01/23/2013 11:59 | | -- |
| | | 01/24/2013 11:45 | 01/24/2013 11:59 | | -- |
| | | 01/25/2013 11:45 | 01/25/2013 11:59 | | -- |
| | | 01/27/2013 11:45 | 01/27/2013 11:59 | | -- |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|----------------|-------------|----------------|--------------|-----------------|-----------------|--|
| 2014000000026 | 2014 D\AED CPR | In Service | 0.00 | 8.00 | | | Domestic Violence Training- Sgt. A Berger AED/CPR- Midstate EMS |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 04/02/2014 08:00 | 04/02/2014 16:00 | |
| | | 04/08/2014 08:00 | 04/08/2014 16:00 | |
| | | 04/14/2014 08:00 | 04/14/2014 16:00 | |
| | | 04/18/2014 08:00 | 04/18/2014 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|------------------------|-------------|----------------|--------------|--|------------------------------------|
| 2014000000002 | 2014 January InService | In Service | 0.00 | 8.00 | <u>Course 1</u> | <u>Course 2</u> |
| | | | | | Legal Updates- Sgt. Murphy Sgt. Fernald | Work Place Violence- Inv Nicholson |
| | | | | | Identification Procedures- Sgt. Fernald | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 01/06/2014 08:00 | 01/06/2014 16:00 | |
| | | 01/08/2014 08:00 | 01/08/2014 16:00 | |
| | | 01/14/2014 08:00 | 01/14/2014 16:00 | |
| | | 01/16/2014 08:00 | 01/16/2014 16:00 | |
| | | 01/22/2014 08:00 | 01/22/2014 16:00 | |
| | | 01/30/2014 08:00 | 01/30/2014 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|-------------------------|-------------|----------------|--------------|----------------------|---|
| | 2014 November inservice | In Service | 0.00 | 8.00 | <u>Course 1</u> | <u>Course 2</u> |
| 2014000000051 | | | | | | Article 35/Use of Foce- Sgt. Brian Bansner Sgt. Christopher Fanigula Infectious Disease- Sgt. Shaffer Supervisor Training-Performance Eval-Sgt. M. Murphy |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 11/04/2014 08:00 | 11/04/2014 16:00 | |
| | | 11/06/2014 08:00 | 11/06/2014 08:00 | |
| | | 11/12/2014 08:00 | 11/12/2014 16:00 | |
| | | 11/14/2014 08:00 | 11/14/2014 16:00 | |
| | | 11/20/2014 08:00 | 11/20/2014 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|-----------------------|-------------|----------------|--------------|----------------------|-----------------|
| 2014000000032 | 2014 TASER in Service | In Service | 0.00 | 8.00 | | |

Course Schedule

| <u>Schedule</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
| | 06/05/2014 08:00 | 06/05/2014 16:00 | | |
| | 06/09/2014 08:00 | 06/09/2014 16:00 | | |
| | 06/11/2014 08:00 | 06/11/2014 16:00 | | |
| | 06/13/2014 08:00 | 06/13/2014 16:00 | | |
| | 06/19/2014 08:00 | 06/19/2014 16:00 | | |
| | 06/27/2014 08:00 | 06/27/2014 16:00 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|---|-------------|----------------|--------------|----------------------|-----------------|-----------------|-----------------|
| 20160000000007 | 2015 December In-Service Active Shooter | In Service | 0.00 | 8.00 | | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 12/01/2015 08:00 | 12/01/2015 16:00 | | |
| | | 12/03/2015 08:00 | 12/03/2015 16:00 | | |
| | | 12/07/2015 08:00 | 12/07/2015 16:00 | | |
| | | 12/07/2015 08:00 | 12/07/2015 16:00 | | |
| | | 12/09/2015 08:00 | 12/09/2015 16:00 | | |
| | | 12/11/2015 08:00 | 12/11/2015 16:00 | | |
| | | 12/11/2015 08:00 | 12/11/2015 16:00 | | |
| | | 12/17/2015 08:00 | 12/17/2015 16:00 | | |
| | | 12/17/2015 08:00 | 12/17/2015 16:00 | | |
| | | 12/17/2015 08:00 | 12/17/2015 16:00 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|------------------------|-------------|----------------|--------------|----------------------|---|
| 20150000000001 | 2015 January Inservice | In Service | 0.00 | 8.00 | | Domestic Violence/Workplace Violence Legal Updates |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 01/05/2015 08:00 | 01/06/2015 16:00 | |
| | | 01/07/2015 08:00 | 01/07/2015 16:00 | |
| | | 01/09/2015 08:00 | 01/09/2015 16:00 | |
| | | 01/19/2015 08:00 | 01/19/2015 16:00 | |
| | | 01/23/2015 08:00 | 01/23/2015 16:00 | |
| | | 01/27/2015 08:00 | 01/27/2015 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|-------------------------------------|-------------|----------------|--------------|----------------------|--|
| 2016000000003 | 2015 May Firearms/Article 35 UOF | In Service | 0.00 | 8.00 | | May Fire arms and Use of Force Article 35 |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 05/01/2015 08:00 | 05/01/2015 16:00 | |
| | | 05/05/2015 08:00 | 03/05/2015 16:00 | |
| | | 05/11/2015 08:00 | 05/11/2015 16:00 | |
| | | 05/13/2015 08:00 | 05/13/2015 16:00 | |
| | | 05/15/2015 08:00 | 05/15/2015 16:00 | |
| | | 05/19/2015 08:00 | 05/19/2015 16:00 | |
| | | 05/21/2015 08:00 | 05/21/2015 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---------------------------------|-------------|----------------|--------------|----------------------|-----------------|
| 2016000000004 | 2015 September Body worn camera | In Service | 0.00 | 8.00 | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 09/04/2015 08:00 | 09/04/2015 16:00 | | -- |
| | | 09/08/2015 08:00 | 09/08/2015 16:00 | | -- |
| | | 09/14/2015 08:00 | 09/14/2015 16:00 | | -- |
| | | 09/22/2015 08:00 | 09/22/2015 16:00 | | -- |
| | | 09/24/2015 08:00 | 09/24/2015 16:00 | | -- |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|----------------------------------|-------------|----------------|--------------|----------------------|-----------------|-----------------|-----------------|
| 2016000000031 | 2016 Active Shooter inService | In Service | 0.00 | 8.00 | | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 04/05/2016 08:00 | 04/06/2016 16:00 | |
| | | 04/07/2016 08:00 | 04/07/2016 16:00 | |
| | | 04/11/2016 08:00 | 04/11/2016 16:00 | |
| | | 04/13/2016 08:00 | 04/13/2016 16:00 | |
| | | 04/15/2016 08:00 | 04/15/2016 16:00 | |
| | | 04/21/2016 08:00 | 04/21/2016 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|-------------------------|-------------|----------------|--------------|----------------------|-------------------------|
| 2017000000004 | 2016 December Inservice | In Service | 0.00 | 8.00 | | Active Shooter Training |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 12/05/2016 08:00 | 12/05/2016 16:00 | |
| | | 12/05/2016 08:00 | 12/05/2016 16:00 | |
| | | 12/07/2016 08:00 | 12/07/2016 16:00 | |
| | | 12/07/2016 08:00 | 12/07/2016 16:00 | |
| | | 12/09/2016 08:00 | 12/09/2016 16:00 | |
| | | 12/15/2016 08:00 | 12/15/2016 16:00 | |
| | | 12/19/2016 08:00 | 12/19/2016 16:00 | |

Instructor

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

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---|-------------|----------------|--------------|----------------------|--|
| 2016000000015 | 2016 January In Service Workplace Violance/Sexual | In Service | 0.00 | 8.00 | | Domestic Violence-Legal Updates-JAU updates-Debour Doctrine-Work placce violence /Sexual harassment |

Course Schedule

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

Print Date: May 25, 2021

Training Course Summary

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

Course Information

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

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|--|-------------|----------------|--------------|-----------------|-----------------|--|
| 2018000000002 | 2017 December Inservice/Active Shooter | In Service | 0.00 | 8.00 | | | Training conducted at DHS by Inv Joe Amerosa |

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---|-------------|----------------|--------------|----------------------|---|
| 2017000000043 | 2017 In-service Taser/Defensive Tactics | In Service | 0.00 | 8.00 | | In-Service instructors Sgt. S Berger, Inv Paladino, Inv Amerosa, Sgt. Wooden, Sgt. Laurey |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 05/02/2017 08:00 | 05/02/2017 16:00 | |
| | | 05/08/2017 08:00 | 05/08/2017 16:00 | |
| | | 05/10/2017 08:00 | 05/10/2017 16:00 | |
| | | 05/16/2017 08:00 | 05/16/2017 16:00 | |
| | | 05/18/2017 08:00 | 05/18/2017 16:00 | |
| | | 05/22/2017 08:00 | 05/22/2017 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|-------------------------|-------------|----------------|--------------|----------------------|--|
| 20170000000007 | 2017 January In-Service | In Service | 0.00 | 8.00 | | Arrest Diversion/ DV/NARCO/ Workplace Violence/Sexual Harassment/City Court Procedures |

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-------------------|-----------------|------------------------|------------------------|------------------|------------------------|
| | | 12/03/2018 08:00 | 12/03/2018 16:00 | | |
| | | 12/07/2018 08:00 | 12/07/2018 16:00 | | |
| | | 12/11/2018 08:00 | 12/11/2018 16:00 | | |
| | | 12/17/2018 08:00 | 12/17/2018 16:00 | | |
| | | 12/19/2018 08:00 | 12/19/2018 16:00 | | |
| | | 12/21/2018 08:00 | 12/21/2018 16:00 | | |
| <u>Instructor</u> | | <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 01/03/2018 08:00 | 01/03/2018 16:00 | |
| | | 01/05/2018 08:00 | 01/05/2018 16:00 | |
| | | 01/09/2018 08:00 | 01/09/2018 16:00 | |
| | | 01/11/2018 08:00 | 01/11/2018 16:00 | |
| | | 01/19/2018 08:00 | 01/19/2018 16:00 | |
| | | 01/25/2018 08:00 | 01/25/2018 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> |
|------------------|--------------------------|-------------|----------------------|
| | 2018 September Inservice | In Service | <u>Credits</u> |
| | | | <u>Hours</u> |
| | | | 0.00 |

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> |
|------------------|--------------------------|-------------|----------------------|
| | 2018 September Inservice | In Service | <u>Credits</u> |
| | | | <u>Hours</u> |
| | | | 0.00 |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 09/10/2018 08:00 | 09/10/2018 16:00 | |
| | | 09/14/2018 08:00 | 09/14/2018 16:00 | |
| | | 09/18/2018 08:00 | 09/18/2018 16:00 | |
| | | 09/20/2018 08:00 | 09/20/2018 16:00 | |
| | | 09/24/2018 08:00 | 09/24/2018 16:00 | |
| | | 09/28/2018 08:00 | 09/28/2018 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 02/05/2019 08:00 | 02/05/2019 16:00 | |
| | | 02/07/2019 08:00 | 02/07/2019 16:00 | |
| | | 02/11/2019 08:00 | 02/11/2019 16:00 | |
| | | 02/15/2019 08:00 | 02/15/2019 16:00 | |
| | | 02/21/2019 08:00 | 02/21/2019 16:00 | |
| | | 02/25/2019 08:00 | 02/25/2019 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|------------------------|-------------|----------------|--------------|----------------------|--|
| 2019000000003 | 2019 January Inservice | In Service | 0.00 | 8.00 | | Infectious Disease (Phil Taurisano UFD)/Use of Force (LT Holt) DV/Work place violence/Sexual Harassment (PO Jess Dodge) |

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 05/06/2019 05:00 | 05/06/2019 13:00 | |
| | | 05/08/2019 05:00 | 05/08/2019 13:00 | |
| | | 05/10/2019 05:00 | 05/10/2019 13:00 | |
| | | 05/16/2019 05:00 | 05/16/2019 13:00 | |
| | | 05/20/2019 05:00 | 05/20/2019 13:00 | |
| | | 05/24/2019 05:00 | 05/24/2019 13:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|------------------------|-------------|----------------|--------------|----------------------|---------------------------|
| 20200000000001 | 2020 January inservice | In Service | 0.00 | 8.00 | | Discovery/Bail reform/UOF |

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| Course NO | Title | Type | Credits | Hours | Prerequisites | Comments |
|----------------|-------------------|------------|---------|-------|---------------|---|
| 20210000000002 | January inservice | In Service | 0.00 | 8.00 | | Cultural Diversity: Sgt. Wood Use of Force: Lt Holt |

Course Schedule

| Schedule | Class ID | Start Date/Time | End Date/Time | Company |
|----------|----------|------------------|------------------|---------|
| | | 01/11/2021 08:00 | 01/11/2021 16:00 | |
| | | 01/15/2021 08:00 | 01/15/2021 16:00 | |
| | | 01/19/2021 08:00 | 01/19/2021 16:00 | |
| | | 01/21/2021 08:00 | 01/21/2021 16:00 | |
| | | 01/25/2021 08:00 | 01/25/2021 16:00 | |
| | | 01/29/2021 08:00 | 01/29/2021 16:00 | |

Instructor

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

Course Information

| Course NO | Title | Type | Credits | Hours | Prerequisites | Comments |
|----------------|------------|------------|---------|-------|---------------|---|
| 20100000000007 | ABC Issues | In Service | 0.00 | 8.00 | | A representative from the Alcohol & Beverage Control Board held a training session at the Police Academy. |

Course Schedule

| Schedule | Class ID | Start Date/Time | End Date/Time | Company |
|----------|----------|------------------|------------------|---------|
| | | 01/20/2010 08:30 | 01/20/2010 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---------------------|--------------------------------|----------------|--------------|----------------------|-----------------|
| 2015000000049 | Abusive Head Trauma | Other Outside agency sponsored | 0.00 | 16.00 | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> | <u>Comments</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|-----------------|
| | | 09/17/2015 08:00 | 09/18/2015 16:00 | | | |

Instructor

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

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|--------------------------|-------------|----------------|--------------|----------------------|-----------------|
| 2011000000002 | Active Shooter - Laser 1 | In Service | 0.00 | 8.00 | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> | <u>Comments</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|-----------------|
| | | 02/07/2011 08:00 | 02/07/2011 16:00 | | | |
| | | 02/09/2011 08:00 | 02/09/2011 16:00 | | | |
| | | 02/15/2011 08:00 | 02/15/2011 16:00 | | | |
| | | 02/17/2011 08:00 | 02/17/2011 16:00 | | | |
| | | 02/23/2011 08:00 | 02/23/2011 16:00 | | | |
| | | 02/25/2011 08:00 | 02/25/2011 16:00 | | | |

Instructor

Employee: Hauck, Michael

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---------------------|-----------------|----------------|----------------------|-----------------|
| 2011000000059 | April - Taser Reset | Recentification | 0.00 | 4.00 | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 04/04/2011 12:00 | 04/04/2011 04:00 | |
| | | 04/06/2011 12:00 | 04/06/2011 16:00 | |
| | | 04/08/2011 12:00 | 04/08/2011 16:00 | |
| | | 04/12/2011 12:00 | 04/12/2011 16:00 | |
| | | 04/14/2011 12:00 | 04/14/2011 16:00 | |
| | | 04/22/2011 12:00 | 04/22/2011 16:00 | |

Instruction

Employee: Hauck, Michael

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|----------------------|-------------|----------------|--------------|----------------------|---|
| 2012000000023 | April 2012 Inservice | In Service | 0.00 | 8.00 | | TASER 4 hours Lt. Dodge JCTOD tour 1 hour Rescue Mission tour 1 1/2 hours |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 04/10/2012 08:00 | 04/10/2012 16:00 | |
| | | 04/12/2012 08:00 | 04/12/2012 16:00 | |
| | | 04/16/2012 08:00 | 04/16/2012 16:00 | |
| | | 04/18/2012 08:00 | 04/18/2012 16:00 | |
| | | 04/20/2012 08:00 | 04/20/2012 16:00 | |
| | | 04/26/2012 08:00 | 04/26/2012 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---------------------------------|-------------|----------------|--------------|----------------------|---|
| 2015000000023 | April 2015 Inservice-CPL Review | In Service | 0.00 | 8.00 | | Presented by the Oneida County D's Office |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 04/07/2015 08:00 | 04/07/2015 16:00 | |
| | | 04/09/2015 08:00 | 04/09/2015 16:00 | |
| | | 04/13/2015 08:00 | 04/13/2015 16:00 | |
| | | 04/15/2015 08:00 | 04/15/2015 16:00 | |
| | | 04/17/2015 08:00 | 04/17/2015 16:00 | |
| | | 04/23/2015 08:00 | 04/23/2015 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|-----------------------------------|-------------|----------------|--------------|----------------------|-----------------|-----------------|-----------------|
| 2021000000010 | April 2021 Inservice: TASER/DV | In Service | 0.00 | 8.00 | | | | |

Course Schedule

Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|------------------------|----------------------|----------------|
| | 04/05/2021 08:00 | 04/05/2021 16:00 | |
| | 04/09/2021 08:00 | 04/09/2021 16:00 | |
| | 04/13/2021 08:00 | 04/13/2021 16:00 | |
| | 04/14/2021 08:00 | 04/14/2021 16:00 | |
| | 04/19/2021 08:00 | 04/19/2021 16:00 | |
| | 04/29/2021 08:00 | 04/29/2021 16:00 | |

Instructor

Reserve Date Course Category Serial ID Notes

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|------------------|-------------|----------------|--------------|----------------------|---|
| In Service | | | | | | |
| 20100000000017 | April In Service | In Service | 0.00 | 8.00 | | Training was held covering Dealing with Developmentally Disabled Persons (Upstate Cerebral Palsey) - Motorcycle Laws Enforcement (P/O DeAngelo) - DWI/SFST Refresher (P/O DeAngelo) |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 04/13/2010 08:30 | 04/13/2010 16:00 | |
| | | 04/19/2010 08:30 | 04/19/2010 16:00 | |
| | | 04/21/2010 08:30 | 04/21/2010 16:00 | |
| | | 04/23/2010 08:30 | 04/23/2010 16:00 | |
| | | 04/27/2010 08:30 | 04/27/2010 16:00 | |
| | | 04/29/2010 08:30 | 04/29/2010 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|----------------------------------|-------------|----------------|--------------|----------------------|-----------------|
| 2011000000058 | April In-service - Legal Updates | In Service | 0.00 | 4.00 | Course 1 | Course 2 |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 04/04/2011 08:00 | 04/04/2011 12:00 | |
| | | 04/06/2011 08:00 | 04/06/2011 12:00 | |
| | | 04/08/2011 08:00 | 04/08/2011 12:00 | |
| | | 04/12/2011 08:00 | 04/12/2011 12:00 | |
| | | 04/14/2011 08:00 | 04/14/2011 12:00 | |
| | | 04/22/2011 08:00 | 04/22/2011 12:00 | |

Instructor

Employee: Dodge, Patrick
Employee: Cifonelli, Scott

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|------------------------|-------------|----------------|--------------|----------------------|--|
| 2013000000039 | April In-Service Taser | In Service | 0.00 | 8.00 | | April In-Service Taught by Lt Dodge, Sgt. Berger, Deputy Laptant Dept Stockhauser. |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 04/09/2013 08:00 | 04/09/2013 16:00 | | |
| | | 04/15/2013 08:00 | 04/15/2013 16:00 | | |
| | | 04/17/2013 08:00 | 04/17/2013 16:00 | | |
| | | 04/19/2013 08:00 | 04/19/2013 16:00 | | |
| | | 04/23/2013 08:00 | 04/23/2013 16:00 | | |
| | | 04/25/2013 08:00 | 04/25/2013 16:00 | | |

Instructor

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

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|-------------------------|--------------------------------|----------------|--------------|----------------------|-----------------|
| 2016000000074 | Arnold markel Symposium | Other Outside agency sponsored | 0.00 | 16.00 | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 10/24/2016 08:00 | 10/25/2016 16:00 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 08/08/2017 08:00 | 08/08/2017 16:00 | |
| | | 08/14/2017 08:00 | 08/14/2017 16:00 | |
| | | 08/16/2017 08:00 | 08/16/2017 16:00 | |
| | | 08/18/2017 08:00 | 08/18/2017 16:00 | |
| | | 08/22/2017 08:00 | 08/22/2017 16:00 | |
| | | 08/24/2017 08:00 | 08/24/2017 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|---|-------------|----------------|--------------|----------------------|-----------------|-----------------|-----------------|
| 20100000000038 | Blood Bound, On-Duty Injuries & Verbal Judo | In Service | 0.00 | 0.00 | | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 09/14/2010 08:00 | 09/14/2010 16:00 | |
| | | 09/16/2010 08:00 | 09/16/2010 16:00 | |
| | | 09/20/2010 08:00 | 09/20/2010 16:00 | |
| | | 09/22/2010 08:00 | 09/22/2010 16:00 | |
| | | 09/24/2010 08:00 | 09/24/2010 16:00 | |
| | | 09/30/2010 08:00 | 09/30/2010 16:00 | |

Instructor

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

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|--------------|-------------|----------------|--------------|----------------------|-----------------|-----------------|-----------------|
| 20100000000033 | CEVO 11 | In Service | 0.00 | 4.00 | | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 10/01/2010 08:00 | 10/31/2010 16:00 | |

| <u>Instructor Person</u> | <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|--------------------------|---------------------|------------------------|------------------|--------------|
| BRADY, THOMAS | | | | |

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|---|--------------------------------|----------------|--------------|-----------------|-----------------|--|
| 2012000000028 | Chemical Suicide Information for First Responders | Other Outside agency sponsored | 0.00 | 2.00 | | | Wright Building Mohawk Valley Psych Center |

Petrie was unable to attend due to being placed on light duty.

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> | <u>Comments</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|-----------------|
| | | 04/04/2012 08:00 | 04/04/2012 10:00 | | | |
| | | 04/11/2012 08:00 | 04/11/2012 10:00 | | | |

Instructor

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

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|---|-------------|----------------|--------------|-----------------|-----------------|-----------------|
| 2011000000051 | December 2010 -Roll call - In Service Bail Procedures | | 0.00 | 0.00 | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> | <u>Comments</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|-----------------|
| | | 12/01/2010 08:00 | 12/31/2010 08:15 | | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---------------------|-------------|----------------|--------------|----------------------|--|
| 2014000000001 | December In Service | In Service | 0.00 | 8.00 | | December in-Service TECC -Homeland Security Supervisor Performance Evaluation- Sgt. Murphy and Sgt. Hernandez |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 12/03/2013 08:00 | 12/03/2013 16:00 | |
| | | 12/09/2013 08:00 | 12/09/2013 16:00 | |
| | | 12/11/2013 08:00 | 12/11/2013 16:00 | |
| | | 12/13/2013 08:00 | 12/13/2013 16:00 | |
| | | 12/17/2013 08:00 | 12/17/2013 16:00 | |
| | | 12/19/2013 08:00 | 12/19/2013 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---|-------------|----------------|--------------|----------------------|---|
| | Defensive Tactics/TASER Recertification | In Service | 0.00 | 8.00 | <u>Course 1</u> | <u>Course 2</u> |
| 20100000000029 | | | | | | The June in-service training conducted was Defensive Tactics (Baton) in the morning session and TASER recertification in the afternoon session. |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 06/08/2010 08:00 | 06/08/2010 16:00 | |
| | | 06/14/2010 08:00 | 06/14/2010 16:00 | |
| | | 06/16/2010 08:00 | 06/16/2010 16:00 | |
| | | 06/18/2010 08:00 | 06/18/2010 16:00 | |
| | | 06/22/2010 08:00 | 06/22/2010 16:00 | |
| | | 06/24/2010 08:00 | 06/24/2010 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|---|-------------|----------------|--------------|----------------------|-----------------|-----------------|-----------------|
| 2021000000009 | Feb 2021 Inservice: Legal Updates/CID Best Practice | In Service | 0.00 | 8.00 | | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 02/02/2021 08:00 | 02/02/2021 16:00 | |
| | | 02/08/2021 08:00 | 02/08/2021 16:00 | |
| | | 02/16/2021 08:00 | 02/16/2021 16:00 | |
| | | 02/18/2021 08:00 | 02/18/2021 16:00 | |
| | | 02/24/2021 08:00 | 02/24/2021 16:00 | |
| | | 02/26/2021 08:00 | 02/26/2021 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|----------------------|-------------|----------------|--------------|----------------------|-----------------|
| 2015000000004 | Feb. In-Service 2015 | In Service | 0.00 | 8.00 | Course 1 | Course 2 |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 02/02/2015 08:00 | 02/02/2015 16:00 | | --- |
| | | 02/04/2015 08:00 | 02/04/2015 16:00 | | --- |
| | | 02/06/2015 08:00 | 02/06/2015 16:00 | | --- |
| | | 02/16/2015 08:00 | 02/16/2015 16:00 | | --- |
| | | 02/18/2015 08:00 | 02/18/2015 16:00 | | --- |
| | | 02/20/2015 08:00 | 02/20/2015 16:00 | | --- |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|--------------------------|-------------|----------------|--------------|----------------------|--|
| | February 2012 In-service | In Service | 0.00 | 7.00 | <u>Course 1</u> | <u>Course 2</u> |
| 2012000000011 | | | | | | 4 hours Legal Updates- Lt. Cifonelli and Dodge 3 hours K9 Demo- P.O. Holt and Farnigula |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 02/06/2012 08:00 | 02/06/2012 16:00 | |
| | | 02/08/2012 08:00 | 02/08/2012 16:00 | |
| | | 02/10/2012 08:00 | 02/10/2012 16:00 | |
| | | 02/14/2012 08:00 | 02/14/2012 16:00 | |
| | | 02/16/2012 08:00 | 02/16/2012 16:00 | |
| | | 02/24/2012 08:00 | 02/24/2012 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---------------------------------------|-------------|----------------|--------------|----------------------|--|
| | February 2012 In-Service Legal Issues | In Service | 0.00 | 8.00 | <u>Course 1</u> | <u>Course 2</u> |
| 2012000000025 | | | | | | Legal Updates 0800-1200 hrs lt. Dodge and Lt. Cifonelli K-9 demo by Po. Fanigula and Po. Holt |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 02/06/2012 08:00 | 02/06/2012 12:00 | |
| | | 02/08/2012 08:00 | 02/08/2012 12:00 | |
| | | 02/10/2012 08:00 | 02/10/2012 16:00 | |
| | | 02/14/2012 08:00 | 02/14/2012 16:00 | |
| | | 02/16/2012 08:00 | 02/16/2012 16:00 | |
| | | 02/24/2012 08:00 | 02/24/2012 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| Course NO | Title | Type | Credits | Hours | Prerequisites | Comments |
|---------------|----------------------------------|------------|---------|-------|---------------|-------------------|
| 2012000000020 | February 2012 Roll Call training | In Service | 0.00 | 0.00 | | Suicide Screening |

Not present:

P.O. Mekic
P.O. Potasiwiecz
P.O. Lomonico

Course Schedule

| Schedule | Class ID | Start Date/Time | End Date/Time | Company | Course Location |
|----------|----------|------------------|------------------|---------|-----------------|
| | | 02/21/2012 15:45 | 02/21/2012 16:00 | | |
| | | 02/21/2012 23:30 | 02/21/2012 23:45 | | |
| | | 02/22/2012 23:30 | 02/22/2012 23:45 | | |
| | | 02/23/2012 20:00 | 02/23/2012 20:15 | | |
| | | 02/24/2012 23:30 | 02/24/2012 23:45 | | |
| | | 02/25/2012 15:45 | 02/25/2012 16:00 | | |
| | | 02/26/2012 20:00 | 02/26/2012 20:15 | | |
| | | 02/27/2012 15:45 | 02/27/2012 16:00 | | |
| | | 02/29/2012 15:45 | 02/29/2012 16:00 | | |
| | | 03/01/2012 20:00 | 03/01/2012 20:15 | | |
| | | 03/05/2012 15:45 | 03/05/2012 16:00 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|--|-------------|----------------|--------------|----------------------|-----------------|-----------------|-----------------|
| 2011000000062 | February In-Service - Active Shooter - Laser | In Service | 0.00 | 0.00 | | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 02/05/2011 08:00 | 02/05/2011 16:00 | |
| | | 02/07/2011 08:00 | 02/07/2011 16:00 | |
| | | 02/09/2011 08:00 | 02/09/2011 16:00 | |
| | | 02/15/2011 08:00 | 02/15/2011 16:00 | |
| | | 02/17/2011 08:00 | 02/17/2011 16:00 | |
| | | 02/23/2011 08:00 | 02/23/2011 16:00 | |
| | | 02/25/2011 08:00 | 02/25/2011 16:00 | |
| | | 05/27/2011 07:45 | 05/27/2011 08:00 | |

Instructor

Employee: Hauck, Michael

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|--|-------------|----------------|--------------|----------------------|-----------------|
| 2011000000054 | February Roll call - 2011 - Report Writing | In Service | 0.00 | 0.00 | Course 1 | Course 2 |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 02/01/2011 08:00 | 02/28/2011 16:00 | |
| | | 05/27/2011 08:00 | 05/27/2011 08:00 | |

Instructor

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

Course Location

| <u>Course Location</u> |
|------------------------|
| |

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---------------------------|-------------|----------------|--------------|----------------------|-----------------|
| | Firearms - September 2011 | In Service | 0.00 | 0.00 | Course_1 | Course_2 |
| | | | | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 09/02/2011 08:00 | 09/02/2011 16:00 | |
| | | 09/07/2011 08:30 | 09/07/2011 16:30 | |
| | | 09/09/2011 08:00 | 09/09/2011 16:00 | |
| | | 09/13/2011 08:00 | 09/13/2011 16:00 | |
| | | 09/15/2011 08:00 | 09/15/2011 16:00 | |
| | | 09/16/2011 08:00 | 09/16/2011 16:00 | |
| | | 09/19/2011 08:00 | 09/19/2011 16:00 | |
| | | 09/21/2011 08:00 | 09/21/2011 16:00 | |
| | | 09/23/2011 08:00 | 09/23/2011 16:00 | |
| | | 09/29/2011 08:00 | 09/29/2011 16:00 | |

Instructor

Employee: Matrulli, David
Employee: Nitti, Dominick
Employee: Dellerba, John
Employee: Amerosa, Joseph
Employee: Bick, Patrick
Employee: Scalise, Peter
Employee: Cifonelli, Scott
Employee: Manolescu, Wayne

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|-------------------------|-------------|----------------|--------------|----------------------|---------------------|
| 2012000000050 | Firearms 2012 inservice | In Service | 0.00 | 8.00 | | 2012 May in-service |

Trenton fish and game club

Firearms staff
Scalise
Nitti
Amerosa
Bick
Manolescu
Matrulli
Cifonelli

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 05/08/2012 08:00 | 05/08/2012 16:00 | |
| | | 05/10/2012 08:00 | 07/10/2012 16:00 | |
| | | 05/14/2012 08:00 | 05/14/2012 16:00 | |
| | | 05/16/2012 08:00 | 05/16/2012 16:00 | |
| | | 05/18/2012 08:00 | 05/18/2012 16:00 | |
| | | 05/24/2012 08:00 | 05/24/2012 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> |
|------------------|--------------------------|-------------|----------------|--------------|----------------------|
| 2016000000053 | Firearms 2016 in-service | In Service | 0.00 | 8.00 | <u>Course 1</u> |
| | | | | | <u>Course 2</u> |

Course Schedule

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

Instructor

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

Training Course Summary

Print Date: May 25, 2021

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|-------------------------|-------------|----------------|--------------|-----------------|-----------------|-----------------|
| 2011000000073 | Firearms May In-Service | In Service | 0.00 | 0.00 | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 04/28/2011 08:00 | 04/28/2011 16:00 | | |
| | | 05/02/2011 08:00 | 05/02/2011 16:00 | | |
| | | 05/04/2011 08:00 | 05/04/2011 16:00 | | |
| | | 05/06/2011 08:00 | 05/06/2011 16:00 | | |
| | | 05/10/2011 08:00 | 05/10/2011 16:00 | | |
| | | 05/12/2011 08:00 | 05/12/2011 16:00 | | |
| | | 05/13/2011 08:00 | 05/13/2011 16:00 | | |
| | | 05/16/2011 08:00 | 05/16/2011 16:00 | | |
| | | 05/18/2011 08:00 | 05/18/2011 16:00 | | |
| | | 05/20/2011 08:00 | 05/20/2011 16:00 | | |
| | | 05/26/2011 08:00 | 05/26/2011 16:00 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|-------------------------------|-------------|----------------|--------------|-----------------|-----------------|-----------------|
| 2012000000037 | Human Trafficking/Verbal Judo | In Service | 0.00 | 8.00 | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 06/05/2012 08:00 | 06/05/2012 16:00 | |
| | | 06/07/2012 08:00 | 06/07/2012 16:00 | |
| | | 06/11/2012 08:00 | 06/11/2012 16:00 | |
| | | 06/13/2012 08:00 | 06/13/2012 16:00 | |
| | | 06/15/2012 08:00 | 06/15/2012 16:00 | |
| | | 06/21/2012 08:00 | 06/21/2012 16:00 | |

Instructor

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

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|--------------------------------------|-----------------|----------------|--------------|-----------------|-----------------|-----------------|
| 2015000000014 | Interview and Interrogation Training | State Sponsored | 0.00 | 16.00 | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 03/18/2015 08:00 | 03/19/2015 16:00 | |
| | | | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> |
|------------------|-----------------------------|
| 2011000000053 | January - In-Service - 2011 |

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|-----------------------------|--------------|----------------|--------------|----------------------|-----------------|
| 2011000000053 | January - In-Service - 2011 | In Service - | 0.00 | 0.00 | <u>Course 1</u> | <u>Course 2</u> |

Course Schedule

Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|------------------------|----------------------|----------------|
| | 01/01/2011 08:00 | 01/31/2011 16:00 | |
| | 05/27/2011 08:00 | 08/27/2011 08:00 | |

Instructor

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

Course Location

.....

.....

Prerequisites

.....

.....

Comments

.....

.....

Print Date: May 25, 2021

Training Course Summary

Course Information

Course No
2012000000006

Title
January 2012 Rollcall
Training

Type
In Service

Prerequisites

| <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> |
|----------------|--------------|-----------------|-----------------|
| 0.00 | 0.00 | | |

Comments
Reference Marker Legend
Tracs issues

Singe received rollcall training when he returned from his injury in February 2012
West received rollcall training when he returned from leave in January/February 2012

Course Schedule

Training Course Summary

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------|------------------------|----------------------|----------------|------------------------|
| | 01/04/2012 17:45 | 01/04/2012 18:00 | | | |
| | 01/07/2012 07:45 | 01/07/2012 08:00 | | | |
| | 01/08/2012 11:45 | 01/08/2012 12:00 | | | |
| | 01/09/2012 15:45 | 01/09/2012 16:00 | | | |
| | 01/10/2012 11:45 | 01/10/2012 12:00 | | | |
| | 01/10/2012 17:45 | 01/10/2012 18:00 | | | |
| | 01/11/2012 07:45 | 01/11/2012 08:00 | | | |
| | 01/14/2012 07:45 | 01/14/2012 08:00 | | | |
| | 01/15/2012 07:45 | 01/15/2012 08:00 | | | |
| | 01/16/2012 07:45 | 01/16/2012 08:00 | | | |
| | 01/16/2012 15:45 | 01/16/2012 16:00 | | | |
| | 01/17/2012 07:45 | 01/17/2012 08:00 | | | |
| | 01/18/2012 17:45 | 01/18/2012 18:00 | | | |
| | 01/19/2012 07:45 | 01/19/2012 08:00 | | | |
| | 01/20/2012 17:45 | 01/20/2012 18:00 | | | |
| | 01/24/2012 11:45 | 01/24/2012 12:00 | | | |
| | 01/30/2012 15:45 | 01/30/2012 16:00 | | | |
| | 01/31/2012 15:45 | 01/31/2012 16:00 | | | |
| | 02/01/2012 15:45 | 02/01/2012 16:00 | | | |
| | 02/14/2012 08:00 | 02/14/2012 08:15 | | | |

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

Training Course Summary

Print Date: May 25, 2021

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | Prerequisites | | | |
|------------------|--|-------------|----------------|--------------|-----------------|-----------------|
| | January-In-service - CAC / Mediation Program | In Service | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> |
| | | | 0.00 | 8.00 | | <u>Comments</u> |

Course Schedule

| <u>Schedule</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
| | 01/01/2011 08:00 | 01/31/2011 16:00 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> | | | <u>Comments</u> |
|------------------|---|-------------|----------------------|--------------|-----------------|-------------------------|
| 2012000000054 | July Roll Call Training Bath In Service Salts | In Service | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> |
| | | | 0.00 | 0.25 | | Sgt. Nitti- Out Injured |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 07/17/2012 19:45 | 07/17/2012 19:59 | |
| | | 07/18/2012 19:45 | 07/18/2012 19:59 | |
| | | 07/19/2012 19:45 | 07/19/2012 19:59 | |
| | | 07/20/2012 19:45 | 07/20/2012 19:59 | |
| | | 07/21/2012 19:45 | 07/21/2012 19:59 | |
| | | 07/22/2012 11:45 | 07/22/2012 11:59 | |
| | | 07/23/2012 11:45 | 07/23/2012 11:59 | |
| | | 07/24/2012 19:45 | 07/24/2012 19:59 | |
| | | 07/25/2012 11:45 | 07/25/2012 11:59 | |
| | | 07/26/2012 11:45 | 07/26/2012 11:59 | |
| | | 07/27/2012 11:45 | 07/27/2012 11:59 | |
| | | 07/29/2012 11:45 | 07/29/2012 11:59 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

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

Course Schedule

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

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---------------------|-------------|----------------|--------------|----------------------|--|
| 2018000000045 | JUne 2018 Inservice | In Service | 0.00 | 8.00 | | Infectious Disease, Barricaded Subject, Legal Updates, Raise the age |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 06/04/2018 08:00 | 06/04/2018 16:00 | |
| | | 06/12/2018 08:00 | 06/12/2018 16:00 | |
| | | 06/14/2018 08:00 | 06/14/2018 16:00 | |
| | | 06/18/2018 08:00 | 06/18/2018 16:00 | |
| | | 06/22/2018 08:00 | 06/22/2018 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|----------------|-------------|----------------|--------------|----------------------|-----------------|
| 2020000000026 | June 2020 EVOC | In Service | 0.00 | 8.00 | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 06/03/2020 08:00 | 06/03/2020 16:00 | | |
| | | 06/09/2020 08:00 | 06/09/2020 16:00 | | |
| | | 06/11/2020 08:00 | 06/11/2020 16:00 | | |
| | | 06/17/2020 08:00 | 06/17/2020 16:00 | | |
| | | 06/19/2020 08:00 | 06/19/2020 16:00 | | |
| | | 06/23/2020 08:00 | 06/23/2020 16:00 | | |
| | | 06/25/2020 08:00 | 06/25/2020 16:00 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> | | |
|------------------|---------------------|-------------|----------------------|--------------|-----------------|
| | June Inservice 2019 | In Service | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> |
| 2019000000029 | | | 0.00 | 8.00 | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 06/07/2019 08:00 | 06/07/2019 16:00 | |
| | | 06/11/2019 08:00 | 06/11/2019 16:00 | |
| | | 06/13/2019 08:00 | 06/13/2019 16:00 | |
| | | 06/17/2019 08:00 | 06/17/2019 16:00 | |
| | | 06/21/2019 08:00 | 06/21/2019 16:00 | |
| | | 06/27/2019 08:00 | 06/27/2019 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> | | |
|------------------|---|-------------|----------------------|--------------|-----------------|
| | June Roll Call Training - Defensive Driving | In Service | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> |
| 2011000000069 | | | 0.00 | 0.00 | |

Course Schedule

| <u>Schedule</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|------------------------|----------------------|----------------|
| <u>Class ID</u> | | | |
| | 06/03/2011 23:45 | 06/03/2011 23:50 | |
| | 06/05/2011 23:45 | 06/05/2011 23:50 | |
| | 06/06/2011 23:45 | 06/06/2011 23:50 | |
| | 06/10/2011 23:45 | 06/10/2011 23:50 | |
| | 06/11/2011 23:45 | 06/11/2011 23:50 | |

Instructor

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

Training Course Summary

Print Date: May 25, 2021

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|--------------|-------------|----------------|--------------|----------------------|-----------------|
| 2013000000060 | Less Lethal | In Service | 0.00 | 8.00 | Course 1 Course 2 | |

Course Schedule

| <u>Schedule</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
| | 09/10/2013 08:00 | 09/10/2013 16:00 | | |
| | 09/16/2013 08:00 | 09/16/2013 16:00 | | |
| | 09/18/2013 08:00 | 09/18/2013 16:00 | | |
| | 09/20/2013 08:00 | 09/20/2013 16:00 | | |
| | 09/24/2013 08:00 | 09/24/2013 16:00 | | |
| | 09/26/2013 08:00 | 09/26/2013 16:00 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

Course NO 2012000000026 Title March 2012 rollcall training In Service

| Prerequisites | | |
|----------------|--------------|-----------------|
| <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> |
| 0.00 | 0.25 | |

| <u>Comments</u> |
|-------------------|
| Defensive Driving |

P.O. Potasiwiecz out injured
P.O. Lomonico suspended
P.O. Deangelis out injured
P.O. Mekic is out and will receive
training when he returns

Course Schedule

Print Date: May 25, 2021

Training Course Summary

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-------------------|------------------|------------------------|------------------------|------------------|------------------------|
| | 03/05/2012 15:45 | 03/05/2012 16:00 | | | |
| | 03/06/2012 07:45 | 03/06/2012 08:00 | | | |
| | 03/07/2012 15:45 | 03/07/2012 16:00 | | | |
| | 03/08/2012 07:45 | 03/08/2012 08:00 | | | |
| | 03/09/2012 07:45 | 03/09/2012 08:00 | | | |
| | 03/10/2012 17:45 | 03/10/2012 18:00 | | | |
| | 03/11/2012 07:45 | 03/11/2012 08:00 | | | |
| | 03/12/2012 17:45 | 03/12/2012 18:00 | | | |
| | 03/13/2012 07:45 | 03/13/2012 08:00 | | | |
| | 03/13/2012 17:45 | 03/13/2012 18:00 | | | |
| | 03/15/2012 17:45 | 03/15/2012 18:00 | | | |
| | 03/20/2012 18:45 | 03/20/2012 19:00 | | | |
| | 03/22/2012 15:45 | 03/22/2012 16:00 | | | |
| | 03/23/2012 07:45 | 03/23/2012 08:00 | | | |
| | 03/27/2012 15:45 | 03/27/2012 16:00 | | | |
| | 03/28/2012 15:45 | 03/28/2012 16:00 | | | |
| | 03/29/2012 15:45 | 03/29/2012 16:00 | | | |
| | 03/30/2012 07:45 | 03/30/2012 08:00 | | | |
| | 03/31/2012 07:45 | 03/31/2012 08:00 | | | |
| | 03/31/2012 15:45 | 03/31/2012 16:00 | | | |
| | 04/04/2012 07:45 | 04/04/2012 08:00 | | | |
| <u>Instructor</u> | | <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> | | |
|------------------|--------------------|-------------|----------------------|--------------|-----------------|
| 2013000000036 | May Fire arms 2013 | In Service | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> |
| | | | 0.00 | 0.00 | Course 2 |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 05/03/2013 08:00 | 05/03/2013 16:00 | |
| | | 05/07/2013 08:00 | 05/07/2013 16:00 | |
| | | 05/13/2013 08:00 | 05/13/2013 16:00 | |
| | | 05/15/2013 08:00 | 05/15/2013 16:00 | |
| | | 05/17/2013 08:00 | 05/17/2013 16:00 | |
| | | 05/21/2013 08:00 | 05/21/2013 16:00 | |
| | | 05/23/2013 08:00 | 05/23/2013 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|-------------------|-------------|----------------|--------------|----------------------|-----------------|
| 2014000000028 | May Firearms 2014 | In Service | 0.00 | 8.00 | | Firearms Staff |

Trenton Fish and Game Club

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 05/12/2014 08:00 | 05/12/2014 16:00 | |
| | | 05/12/2014 08:00 | 05/12/2014 16:00 | |
| | | 05/14/2014 08:00 | 05/14/2014 16:00 | |
| | | 05/16/2014 08:00 | 05/16/2014 16:00 | |
| | | 05/20/2014 08:00 | 05/20/2014 16:00 | |
| | | 05/28/2014 08:00 | 05/28/2014 16:00 | |
| | | 05/30/2014 08:00 | 05/30/2014 16:00 | |
| | | 06/06/2014 08:00 | 06/06/2014 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|---------------|-------------|----------------|--------------|----------------------|---|
| 2014000000027 | May Roll call | In Service | 0.00 | 0.25 | | Aggravated Harrassment declared unconstitutional. |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 05/21/2014 11:45 | 05/21/2014 11:59 | |
| | | 05/22/2014 11:45 | 05/22/2014 11:59 | |
| | | 05/23/2014 11:45 | 05/23/2014 11:59 | |
| | | 05/26/2014 11:45 | 05/26/2014 11:59 | |
| | | 05/27/2014 11:45 | 05/27/2014 11:59 | |
| | | 05/28/2014 11:45 | 05/28/2014 11:59 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|--|-------------|----------------|--------------|----------------------|-----------------|-----------------|-----------------|
| 2011000000050 | November 2010 - In-Service - Violation Arrests | In Service | 0.00 | 0.00 | | | | |

Course Schedule

Schedule

Class ID

| <u>Start Date/Time</u> | <u>End Date/Time</u> |
|------------------------|----------------------|
| 11/19/2010 23:45 | 11/30/2010 23:50 |
| 11/20/2010 15:45 | 11/20/2010 16:00 |
| 11/21/2010 15:45 | 11/21/2010 16:00 |
| 11/22/2010 11:45 | 11/23/2010 12:00 |
| 11/28/2010 15:45 | 12/09/2010 16:00 |

Instructor

Reserve Date

Course Category

Serial ID

Notes

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|--------------------------|-------------|----------------|--------------|-----------------|-----------------|--|
| 2012000000091 | November 2012 in-service | In Service | 0.00 | 8.00 | | | Infectious disease-Sgt Shaffer Article 35-Lt Dodge Supervisor performance evaluation training-Lt Dodge RMSfile 15 updates-Po Foley PO Abel Suspended Sgt. Cozza out sick |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 11/06/2012 08:00 | 11/06/2012 16:00 | |
| | | 11/08/2012 08:00 | 11/08/2012 16:00 | |
| | | 11/14/2012 08:00 | 11/14/2012 16:00 | |
| | | 11/16/2012 08:00 | 11/16/2012 16:00 | |
| | | 11/28/2012 08:00 | 11/28/2012 16:00 | |
| | | 11/30/2012 08:00 | 11/30/2012 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|----------------------------------|-------------|----------------|--------------|----------------------|-----------------|
| 2014000000055 | November 2014 Roll Call training | In Service | 0.00 | 0.25 | Course 1 | Course 2 |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 11/02/2014 11:45 | 11/02/2014 11:59 | |
| | | 11/03/2014 11:45 | 11/03/2014 11:59 | |
| | | 11/06/2014 11:45 | 11/06/2014 11:59 | |
| | | 11/11/2014 11:45 | 11/11/2014 11:59 | |
| | | 11/14/2014 11:45 | 11/14/2014 11:59 | |
| | | 11/15/2014 11:45 | 11/15/2014 11:59 | |
| | | 11/16/2014 11:45 | 11/16/2014 11:59 | |
| | | 11/17/2014 11:45 | 11/17/2014 11:59 | |
| | | 11/22/2014 11:45 | 11/22/2014 11:59 | |
| | | 11/24/2014 11:45 | 11/24/2014 11:59 | |
| | | 11/30/2014 11:45 | 11/30/2014 11:59 | |
| | | 12/03/2014 11:45 | 12/03/2014 11:59 | |

Instructor

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

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|-------------------------|-------------|----------------|--------------|-----------------|-----------------|---|
| 20160000000006 | October 2015 in-service | In Service | 0.00 | 8.00 | | | Infectious disease-Dealing with difficult people-K9 |

Course Schedule

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

Instructor

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

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|---|-------------|----------------|--------------|-----------------|-----------------|--------------------|
| 20120000000081 | October Roll Call Police Priority Dispatch System | In Service | 0.00 | 0.25 | | | Roll Call Training |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 10/09/2012 18:45 | 10/09/2012 18:59 | | |
| | | 10/19/2012 23:45 | 10/19/2012 23:59 | | |
| | | 10/25/2012 23:45 | 10/25/2012 23:59 | | |
| | | 10/26/2012 07:45 | 10/26/2012 07:59 | | |
| | | 10/27/2012 23:45 | 10/27/2012 23:59 | | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|---|--------------------------------|----------------|--------------|-----------------|-----------------|-----------------|
| 2014000000042 | Reid Technique Interview Interrogation | Other Outside agency sponsored | 0.00 | 32.00 | | | |

Course Schedule

| <u>Schedule</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|------------------------|----------------------|----------------|
| | 10/21/2014 08:00 | 10/24/2014 16:00 | |

Instructor

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

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|----------------------------------|-------------|----------------|--------------|-----------------|-----------------|-----------------|
| 2016000000051 | Riot Control & Civil Disturbance | In Service | 0.00 | 0.00 | | | |

Course Schedule

| <u>Schedule</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|------------------------|----------------------|----------------|
| Riot Control | 05/03/2016 08:00 | 05/03/2016 16:00 | |
| Riot Control | 05/09/2016 08:00 | 05/09/2016 16:00 | |
| Riot Control | 05/11/2016 08:00 | 05/11/2016 16:00 | |
| Riot Control | 05/19/2016 08:00 | 05/19/2016 16:00 | |
| Riot Control | 05/27/2016 08:00 | 05/27/2016 16:00 | |

Instructor

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

Training Course Summary

Course Information

| <u>Course No</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> | <u>Comments</u> | | |
|------------------|---|-------------|----------------------|-----------------|-----------------|---|
| | | | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> |
| 2011000000076 | Roll Call August-Response To Resistance | In Service | 0.00 | 0.00 | | West was on military leave but was given all roll call trainings when he returned january/february 2012 |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 08/01/2011 08:00 | 08/01/2011 08:15 | | |
| | | 08/02/2011 08:00 | 08/02/2011 08:05 | | |
| | | 08/03/2011 08:00 | 08/03/2011 08:15 | | |
| | | 08/04/2011 15:45 | 08/04/2011 16:00 | | |
| | | 08/06/2011 15:45 | 08/06/2011 16:00 | | |
| | | 08/07/2011 08:00 | 08/07/2011 16:00 | | |
| | | 08/08/2011 08:00 | 08/08/2011 08:15 | | |
| | | 08/09/2011 08:00 | 08/09/2011 08:15 | | |
| | | 08/10/2011 15:45 | 08/10/2011 16:00 | | |
| | | 08/11/2011 15:45 | 08/11/2011 16:00 | | |
| | | 08/12/2011 08:00 | 08/12/2011 08:15 | | |
| | | 08/14/2011 08:00 | 08/14/2011 08:15 | | |
| | | 08/19/2011 08:00 | 08/19/2011 08:15 | | |
| | | 08/22/2011 08:00 | 08/22/2011 08:15 | | |
| | | 08/23/2011 15:45 | 08/23/2011 16:00 | | |
| | | 08/26/2011 08:00 | 08/26/2011 08:15 | | |
| | | 08/27/2011 08:00 | 08/27/2011 08:15 | | |
| | | 08/28/2011 15:45 | 08/28/2011 16:00 | | |
| | | 08/30/2011 15:45 | 08/30/2011 16:00 | | |
| | | 02/14/2012 08:00 | 02/14/2012 08:15 | | |

Training Course Summary

Print Date: May 25, 2021

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|--------------------|----------------------------------|------------------|------------------|--|
| Course Information | | | | |
| Course NO | Title | Type | Credits | Prerequisites |
| 2012000000094 | Roll Call training Winter issues | In Service | 0.00 | Course 1 0.50 |
| | | | | Course 2 Comments Winter Issues |
| | | | | Harrington on Vacation Abel Suspended |
| Course Schedule | | | | |
| Schedule | Class ID | Start Date/Time | End Date/Time | Company |
| | | 11/20/2012 23:45 | 11/20/2012 23:59 | Course Location |
| | | 11/21/2012 23:45 | 11/21/2012 23:59 | |
| | | 11/22/2012 15:45 | 11/22/2012 15:59 | |
| | | 11/23/2012 23:45 | 11/23/2012 23:59 | |
| | | 11/24/2012 23:45 | 11/24/2012 23:59 | |
| | | 11/25/2012 15:45 | 11/25/2012 15:59 | |
| | | 11/26/2012 23:45 | 11/26/2012 23:59 | |
| | | 11/27/2012 23:45 | 11/27/2012 23:59 | |
| | | 11/28/2012 15:45 | 12/28/2012 15:59 | |
| | | 11/29/2012 23:45 | 11/29/2012 23:59 | |
| | | 11/30/2012 23:45 | 11/30/2012 23:59 | |
| | | 12/05/2012 15:45 | 12/05/2012 15:59 | |
| Instructor | Reserve Date | Course Category | Serial ID | Notes |

Training Course Summary

Print Date: May 25, 2021

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|----------------|--------------------------|----------------|--------------|-----------------|-----------------|-----------------|
| 2016000000068 | Search Warrant | State Sponsored Training | 0.00 | 16.00 | | | |

Course Schedule

| <u>Schedule</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|------------------------|----------------------|----------------|
| | 10/05/2016 08:00 | 10/06/2016 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|--------------------------|-------------|----------------|--------------|----------------------|---|
| 20120000000070 | September 2012 Inservice | In Service | 0.00 | 8.00 | | Bath Salts-Shane Levigne Corporation Council review of Bath Salts legislation for the City of Utica City Court DNA procedure-Gaspa JAU Refresher Sgt. Convertino/Inv Delleriba |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 09/11/2012 08:00 | 09/11/2012 16:00 | |
| | | 09/13/2012 08:00 | 09/13/2012 16:00 | |
| | | 09/17/2012 08:00 | 09/17/2012 16:00 | |
| | | 09/19/2012 08:00 | 09/19/2012 16:00 | |
| | | 09/21/2012 08:00 | 09/21/2012 16:00 | |
| | | 09/27/2012 08:00 | 09/27/2012 16:00 | |

Instructor

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

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|--------------------------|-------------|----------------|--------------|----------------------|-----------------|-----------------|-----------------|
| 2014000000053 | September 2014 roll call | In Service | 0.00 | 0.15 | | | | |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|
| | | 09/01/2014 11:45 | 09/01/2014 11:59 | |
| | | 09/09/2014 11:45 | 09/09/2014 11:59 | |
| | | 09/10/2014 11:45 | 09/10/2014 11:59 | |
| | | 09/11/2014 11:45 | 09/11/2014 11:59 | |
| | | 09/14/2014 11:45 | 09/14/2014 11:59 | |
| | | 09/16/2014 11:45 | 09/16/2014 11:59 | |
| | | 09/19/2014 11:45 | 09/19/2014 11:59 | |
| | | 09/23/2014 11:45 | 09/23/2014 11:59 | |
| | | 09/25/2014 11:45 | 09/25/2014 11:59 | |

Instructor

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

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Prerequisites</u> | <u>Comments</u> |
|------------------|------------------------------|-------------|----------------|--------------|----------------------|---|
| 2011000000106 | September Roll-call training | In Service | 0.00 | 0.00 | <u>Course 1</u> | <u>Course 2</u> |
| | | | | | | City Court Informations and Supporting Depositions Howie Brodt injured David Singe injured West on military leave but was given all rollcall training upon return in January/February 2012 |

Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
| | | 09/06/2011 08:00 | 09/06/2011 08:15 | | |
| | | 09/07/2011 08:00 | 09/07/2011 08:15 | | |
| | | 09/08/2011 08:00 | 09/08/2011 08:15 | | |
| | | 09/12/2011 07:45 | 09/12/2011 08:00 | | |
| | | 09/15/2011 23:30 | 09/15/2011 23:45 | | |
| | | 09/16/2011 07:45 | 09/16/2011 08:00 | | |
| | | 09/18/2011 07:45 | 09/18/2011 08:00 | | |
| | | 09/20/2011 07:45 | 09/20/2011 08:00 | | |
| | | 09/21/2011 23:30 | 09/21/2011 23:45 | | |
| | | 09/22/2011 07:45 | 09/22/2011 08:00 | | |
| | | 09/23/2011 07:45 | 09/23/2011 08:00 | | |
| | | 09/25/2011 23:30 | 09/25/2011 23:45 | | |
| | | 09/26/2011 07:45 | 09/26/2011 08:00 | | |
| | | 09/28/2011 07:45 | 09/28/2011 08:00 | | |
| | | 09/29/2011 08:00 | 09/29/2011 08:15 | | |
| | | 09/30/2011 07:45 | 09/30/2011 08:00 | | |
| | | 02/14/2012 08:00 | 02/14/2012 08:15 | | |

Print Date: May 25, 2021

Training Course Summary

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|--|--------------|------------------|------------------|----------|
| Course Information | | | | |
| Course NO 20200000000023 Title TASER inservice Type In Service | | | | |
| Prerequisites | Credits | Hours | Course 1 | Course 2 |
| | 0.00 | 4.00 | | |
| Course Schedule | | | | |
| Schedule | Class ID | Start Date/Time | End Date/Time | Company |
| | | 04/03/2020 08:00 | 04/03/2020 12:00 | |
| | | 04/06/2020 08:00 | 04/06/2020 12:00 | |
| | | 04/07/2020 08:00 | 04/07/2020 12:00 | |
| | | 04/14/2020 08:00 | 04/14/2020 12:00 | |
| | | 04/15/2020 08:00 | 04/15/2020 12:00 | |
| | | 04/16/2020 08:00 | 04/16/2020 12:00 | |
| | | 04/20/2020 08:00 | 04/20/2020 12:00 | |
| | | 04/23/2020 08:00 | 04/23/2020 12:00 | |
| | | 04/24/2020 08:00 | 04/24/2020 12:00 | |
| | | 04/28/2020 08:00 | 04/28/2020 12:00 | |
| | | 04/30/2020 08:00 | 04/30/2020 12:00 | |
| Instructor | Reserve Date | Course Category | Serial ID | Notes |

Print Date: May 25, 2021

Training Course Summary

Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | Prerequisites | | | |
|------------------|---|-------------|----------------|--------------|-----------------|-----------------|
| 2016000000036 | USAO Fed. Firearms Statutes & Herion OD Statute | In Service | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> |
| | | | 8.00 | 0.00 | | |

Course Schedule

| <u>Schedule</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> |
|-----------------|------------------------|----------------------|----------------|
| | 05/31/2016 08:00 | 05/31/2016 16:00 | |

Instructor

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