PERSONNEL ACTION FORM (PAF)

Employee Name **Douglas A. Davis** Today's Date **3-11-2024** Effective Date **3-11-2024**

PERSONNEL ACTIONS (Mark all boxes that apply)

- ☐ New Hire & Benefit Selection
- ☐ Address, Name or Phone Change
- ☐ Other
- ☑ Re-Classification, Promotion or Demotion
- ☐ Resignation, Retirement or Termination

HR USE ONLY

Date Received in HR
3-11-2024

Date Sent to Payroll
3-11-2024

PERSONAL INFORMATION CHANGE

☐ Address Change _____

County: _____ School District Number: _____

☐ Name Change: _____ Phone : _____

Date of HR Updates: _____ Medical _____ Dental _____ Vision _____ Life _____ Pension _____ Deferred Comp/Colonial

☐ Drivers License Number: _____ ☐ Employee Number _____ ☐ Added to Right Stuff

EMPLOYMENT STATUS/PAYROLL STATUS CHANGE (Attach supporting documentation)

EMPLOYMENT STATUS:

☐ New Hire Date: _____ Title: _____ Department: _____

☐ Full Time ☐ Part Time ☐ Reserve/Volunteer ☐ Elected

☐ Union ☐ Non-Union ☐ Appointed ☐ Classified ☐ Unclassified ☐ FLSA Exempt

☑ Re-Classification Date: **3-11-2024** ☐ Promotion Date: _____ ☐ Demotion Date: _____

Title: **Acting Chief of Police** Department: **Safety/Police**

☐ Resignation ☐ Retirement ☐ Termination Date: _____ Benefits End: _____

PAYROLL STATUS: ☐ Increase ☐ Decrease ☐ Other _____

Current $_____ ☐ Hourly ☐ Bi-Weekly Change to: $_____ ☐ Hourly ☐ Bi-Weekly

Supervisor Signature/Date: _____ **Director Signature/Date:** _____

(If documentation is not attached)

BENEFIT SELECTION UPON HIRE

IRS rules dictate that employees enrolled in medical, dental and vision cannot enroll, cancel or change enrollment options during the plan year except during an open enrollment, or in the event of a "change in status"/life event. It is the employee's responsibility to notify the HR Department of the life event within 31 days of the life event. Employees are encouraged to provide notification prior to 30 thirty days.

MEDICAL	DENTAL	VISION	LIFE	Deferred Comp	Documents to Attach for Payroll
☐ Single	☐ Single	☐ Single	☐ Term (Pd. By City)	☐ Selected	☐ W2 & W4
☐ Double	☐ Double	☐ Double	☐ Beneficiary Selected	$ _____/pay	☐ Retirement & SS Form
☐ Family	☐ Family	☐ Family	☐ Voluntary Coverage	☐ Declined	☐ Direct Deposit
☐ Waived	☐ Waived	☐ Waived	☐ Colonial Coverage		☐ Union Deduction
Effective Date	Effective Date	Effective Date	Effective Date	Employee's Email Address:	

City of Circleville

Department of Public Safety
Division of Police

RECEIVED
MAR 11 2024

Oath of Office

I, **Douglas A. Davis**, do solemnly swear, that I will support the Constitution of the United States of America, the Constitution of Ohio, and the Ordinances of the City of Circleville, that I will faithfully, honestly, and impartially perform my duties as **Acting Chief of Police**, as required and set forth by law, to the best of my ability, So Help Me God.

Douglas A. Davis

I hereby certify that on the 11th day of, I administered the Oath of Office to Douglas A. Davis, Acting Chief of Police, for the Circleville Police Department, Circleville, Ohio.

Michelle L. Blanton
Mayor/Acting Safety Director

SCANNED

Pickaway County CSEA
1005 S. Pickaway Street
P.O. Box 610
Circleville, OH 43113

Telephone Number: 740-474-7588
Toll Free Number: 1-800-822-5437
Fax Number: 740-474-9333
CSEA Website: www.pickawayjfs.org

Ohio Department of Job and Family Services

FINDINGS AND RECOMMENDATIONS TO TERMINATE THE ADMINISTRATIVE CHILD SUPPORT ORDER

Obligee: [redacted]
Obligor: DOUGLAS DAVIS
Health Insurance Obligor(s):

Date Issued: 7-5-23
Case Number:
Order Number: [redacted]

A. The Pickaway County Child Support Enforcement Agency (CSEA) has conducted an investigation to determine whether one of the administrative termination reasons, as described in Ohio Administrative Code rule 5101:12-60-50, exists to terminate a child support order.

B. As a result of the investigation, the CSEA **FINDS and RECOMMENDS** that (only those boxes that are checked apply):

1. ☒ The child support and medical support provisions for Taylor Davis, born 7-19-05, should terminate effective 7-18-23 for the following reason: 18 & graduated.

2. ☒ There is no other minor child subject to the support order; or

☐ There is another minor child(ren) subject to the support order. The obligor should continue to pay child support in the amount of $ per month per child, plus processing charges, for the other minor child(ren) subject to the order. The Obligor and Obligee should comply with all medical support provisions of the child support order; or

☐ There is another minor child(ren) subject to the support order. The obligor should continue to pay:

- $ per month, plus 2% processing charge, for current child support when private health insurance is being provided in accordance with the support order.
- $ per month, plus 2% processing charge, for current child support when private health insurance is not being provided in accordance with the support order.
- $ per month, plus 2% processing charge, for cash medical support when private health insurance is not being provided in accordance with the support order.

The obligor and obligee should comply with all medical and support provisions of the child support order; or

☐ That pay $ per month for child support, $ per month for cash medical support, plus 2% processing charge, for a total of _____ per month for the child(ren) named above; or

☐ This is a split parenting child support order and there is another minor child(ren) subject to the support order. As a result of re-calculating the split parenting child support order, the Child Support Obligor is now . The obligor should pay $ per month per child for current child support plus processing charge. The Obligor and Obligee should comply with all medical support provisions of the child support order; or

☐ This is a split parenting child support order and there is another minor child(ren) subject to the support order. As a result of re-calculating the split parenting child support order, the Child Support Obligor is now .
The pay:

- $ per month, plus 2% processing charge, for current child support when private health insurance is being provided in accordance with the support order.
- $ per month, plus 2% processing charge, for current child support when private health insurance is not being provided in accordance with the support order.
- $ per month, plus 2% processing charge, for cash medical support when private health insurance is not being provided in accordance with the support order.

The Child Support Obligor and Child Support Obligee should comply with all medical support provisions of the child support order; or

☐ That pay $ per month for child support, $ per month for cash medical support, plus an additional 2% processing charge, for a total of per month for the child(ren) named above.

3. ☐ Continued payment and disbursement of payments paid to the order is not expected to result in an overpayment.

☒ Continued payment and disbursement of payments paid pursuant to the order is expected to result in or add to an overpayment. Therefore, the support payments should be impounded (held by the CSEA) and, after the child support order has been terminated, all impounded funds should be disbursed (sent) to the appropriate person. A copy of the Administrative Order to Impound Support (JFS 07523) is attached.

4. ☒ The obligor does not owe any arrears or other balances as of 6-30-23.
☐ The obligor owes $ in arrears and/or other balances as of . Therefore, the obligor should be ordered to pay the amount of $ per month, plus processing charges, as a payment on arrears.
☒ The obligee has been overpaid $74.49 as of 6-30-23.

5. ☐ The obligor owes amounts for other minor children, arrears, other balances, or other obligations. Therefore, an income withholding or deduction notice should be issued or should continue.
☒ The obligor does not owe any amounts for other minor children, arrears, other balances, or other obligations. Therefore, an income withholding or deduction notice should not be issued or should be terminated.

6. ☐ No collections are being held by the CSEA.
☒ The CSEA is holding collections totaling $176.80 as of 6-30-23. Therefore, payments on hold will apply to any outstanding balances and then refund to obligor.

C. If neither the obligor nor the obligee requests an administrative hearing to object to the findings or recommendations, the CSEA will issue an administrative order incorporating these recommendations.

ADMINISTRATIVE HEARING RIGHTS

Both the obligee and obligor have the right to request an administrative hearing to object to the findings and recommendations contained in this notice.

To request an administrative hearing, complete the "Request for Administrative Hearing" on the last page and return the completed "Request for Administrative Hearing" to the CSEA. **You have 14 days after this notice is issued** to return the "Request for Administrative Hearing" to the CSEA.

If either the obligee or obligor requests an administrative hearing within 14 days after this notice is issued, a revised administrative child support order **will not be** issued until a final determination is made.

If neither the obligor nor obligee requests an administrative hearing within 14 days after this notice is issued, a revised administrative child support order **will be** issued.

Lisa Leach

7-5-2023
Date

LISA M. LEACH
PICKAWAY County CSEA
1005 S Pickaway St
P.O. Box 610
Circleville, OH 43113

Telephone Number: 740-474-7588
Toll Free Number: 1-800-822-5437
Fax Number: 740-474-9333

Copy to: Obligee or obligee's representative
Obligor or obligor's representative

Pickaway County Child Support Enforcement Agency

REQUEST FOR ADMINISTRATIVE TERMINATION HEARING

Obligee: [redacted]
Obligor: DOUGLAS DAVIS

Case Number:
Order Number: [redacted]

Date Findings and Recommendations Issued: 7-5-23

I object to the Findings and Recommendations because they contain the following mistake(s):

_____

_____

_____

_____

_____

I request an administrative hearing so I can prove to the CSEA that the mistake(s) mentioned above exist in the Finding and Recommendations. I understand that I have 14 days after the Findings and Recommendations is issued to return this request to the CSEA named below.

Pickaway County CSEA
1005 S Pickaway St
P.O. Box 610
Circleville, OH 43113

_____ _____

Signature Print Name

_____

Address 1

_____

Address 2

_____

City, State, ZIP

Valerie Dilley

From: Doug Davis <ddavis@circlevillepolice.com>
Sent: Monday, July 10, 2023 8:03 AM
To: Valerie Dilley
Subject: Child Support
Attachments: child support.pdf

Attached is findings from CSEA. I assume that there will be more documentation coming, but wanted to make sure you have all of it.

Respectfully,

Douglas A. Davis

Douglas A. Davis
Deputy Chief of Police
Circleville Police Department
Office: (740) 474-8888
Desk: (740) 302-0083
ddavis@circlevillepolice.com

Tami Robison

From: Valerie Dilley
Sent: Thursday, June 29, 2023 8:49 AM
To: Tami Robison
Subject: FW: Davis Probationary Period

Please print for Doug's file.

Thanks!

From: Doug Davis <ddavis@circlevillepolice.com>
Sent: Thursday, June 29, 2023 8:47 AM
To: Valerie Dilley <vdilley@circlevilleoh.gov>
Cc: Chief Shawn Baer <sbaer@circlevillepolice.com>
Subject: RE: Davis Probationary Period

Received, thank you.

Respectfully,

Douglas A. Davis

Douglas A. Davis
Deputy Chief of Police
Circleville Police Department
Office: (740) 474-8888
Desk: (740) 302-0083
ddavis@circlevillepolice.com

From: Valerie Dilley <vdilley@circlevilleoh.gov>
Sent: Thursday, June 29, 2023 8:43 AM
To: Doug Davis <ddavis@circlevillepolice.com>
Cc: Chief Shawn Baer <sbaer@circlevillepolice.com>
Subject: FW: Davis Probationary Period

Deputy Chief Davis,

Responsive to your request in a separate email this morning, information regarding your probationary status is below.

If you any questions, please do not hesitate to contact me.

Valerie

From: Valerie Dilley
Sent: Tuesday, December 27, 2022 11:08 AM

To: Chief Shawn Baer <sbaer@circlevillepolice.com>
Subject: Davis Probationary Period

Deputy Chief of Police Probationary Period: 3-13-2022 to 6-26-2022 (agreed upon date with the Mayor)

Admin leave effective date: 4-11-2022

Extension of Probationary Period Agreement: dated 6-14-2022 to add time spent on admin leave

4-11-2022 to 6-26-2022 = 76 days

Return from admin leave 1-3-2023

1-3-2023 + 76 days = 3-20-2023

End of probationary period is 3-20-2023

Valerie Dilley
Human Resources Director
City of Circleville
104 E. Franklin Street
Circleville, OH 43113
PH: 740-477-8200 ext. 5055
FX: 740-477-5829
www.circlevilleoh.gov

Find us on Facebook!

Tami Robison

From: Valerie Dilley
Sent: Monday, June 26, 2023 10:32 AM
To: Tami Robison
Subject: FW: Payroll Deductions

Please file in Doug Davis's personnel file.

From: Mark Bidwell <mbidwell@circlevilleoh.gov>
Sent: Monday, June 26, 2023 10:31 AM
To: Doug Davis <ddavis@circlevillepolice.com>; Desirae Logsdon <dlogsdon@circlevilleoh.gov>
Cc: Chief Shawn Baer <sbaer@circlevillepolice.com>; Valerie Dilley <vdilley@circlevilleoh.gov>
Subject: RE: Payroll Deductions

Doug,

We will make this change effective on the check that you receive this week. There is no further information that we need at this time.

Thanks,
Mark

From: Doug Davis <ddavis@circlevillepolice.com>
Sent: Saturday, June 24, 2023 10:18 AM
To: Mark Bidwell <mbidwell@circlevilleoh.gov>; Desirae Logsdon <dlogsdon@circlevilleoh.gov>
Cc: Chief Shawn Baer <sbaer@circlevillepolice.com>; Valerie Dilley <vdilley@circlevilleoh.gov>
Subject: RE: Payroll Deductions

Mark

I purchased a new vehicle over the weekend and will still be using the same bank, [redacted] I currently have $494.00 deducted and deposited to the account. I now will need **$535.00** deposited to the account. Same routing numbers and same account. Just need to change the dollar amount.

Please let me know if you need anything additional from me.

Thank you. I appreciate your assistance.

Respectfully,

Douglas A. Davis

Douglas A. Davis
Deputy Chief of Police
Circleville Police Department
Office: (740) 474-8888
Desk: (740) 302-0083
ddavis@circlevillepolice.com

From: Doug Davis
Sent: Friday, February 24, 2023 11:23 AM
To: Mark Bidwell <mbidwell@circlevilleoh.gov>; Desirae Logsdon <dlogsdon@circlevilleoh.gov>
Cc: Chief Shawn Baer <sbaer@circlevillepolice.com>; Valerie Dilley <vdilley@circlevilleoh.gov>
Subject: RE: Payroll Deductions

Great, thank you so much!

Respectfully,

Douglas A. Davis

Douglas A. Davis
Deputy Chief of Police
Circleville Police Department
Office: (740) 474-8888
Desk: (740) 302-0083
ddavis@circlevillepolice.com

From: Mark Bidwell <mbidwell@circlevilleoh.gov>
Sent: Friday, February 24, 2023 11:23 AM
To: Doug Davis <ddavis@circlevillepolice.com>; Desirae Logsdon <dlogsdon@circlevilleoh.gov>
Cc: Chief Shawn Baer <sbaer@circlevillepolice.com>; Valerie Dilley <vdilley@circlevilleoh.gov>
Subject: RE: Payroll Deductions

Mr. Davis,

I am sorry that this has happened. I will have the payment changed so that it will be correct going forward.

Mark

From: Doug Davis <ddavis@circlevillepolice.com>
Sent: Friday, February 24, 2023 11:20 AM
To: Mark Bidwell <mbidwell@circlevilleoh.gov>
Cc: Chief Shawn Baer <sbaer@circlevillepolice.com>; Valerie Dilley <vdilley@circlevilleoh.gov>
Subject: Payroll Deductions

Mr. Bidwell

I received a call from my bank last week indicating that my truck payment was late. Obviously this concerned me because I have my payments coming straight from my payroll. I have a vehicle loan and a consolidation loan both coming out of my paycheck and being sent to [redacted] I contacted the bank and they advised that for the life of my loans not enough money has been being sent to them. I have been short for the entire life of the loans. I have attached the authorization form to this email.

I need **$494.00** to be sent per pay to the exact same account numbers and routing numbers instead of **$482.10.** No other changes need made except for the dollar amount that is being sent to [redacted] This should not affect my deductions going to the [redacted] at all.

Please let me know if you need anything else form me or if you have any questions.

Thank you for your assistance.

Respectfully,

Douglas A. Davis
Deputy Chief of Police
Circleville Police Department
Office: (740) 474-8888
Desk: (740) 302-0083
ddavis@circlevillepolice.com

Steven J. Sarver, CLEE
Ohio Chief Consultant, LLC
7015 Vail Court
Cincinnati, OH 45247
513.340.0991

June 13, 2023

Chief Shawn Baer
Circleville Police Department
151 E. Franklin Street
Circleville, OH 43113

Chief Baer,

I have completed the scoring of the 100-question written examination administered to your ten Corporal - Sergeant candidates held on June 12, 2023. Their scores are provided on the following page. I have also attached all scored answer sheets for your files and for the candidates to review. Should the candidates submit any written challenges during the review period I will address them at that time unless your Civil Service Commission makes those decisions.

I truly appreciate the opportunity in providing my written promotional examination services to the Circleville Police Department. Deputy Chief Doug Davis and HR Director Valeria Dilley were a tremendous help throughout this process and answered all questions I had while I worked through creating the examination. They are undoubtedly a credit to the City of Circleville.

Respectfully submitted,

Steven J. Sarver

Steven J. Sarver, CLEE

Agreement Between the City of Circleville and Douglas A. Davis

On March 21, 2023, the City of Circleville "City" and Douglas A. Davis "Davis" met to discuss the City's unintentional error that resulted in the underpayment of the City's share and Davis's share of Ohio Police and Fire Pension Fund (OP&F). Specifically, the City's share ($645.00) and Davis's payroll deducted share ($405.19) was not submitted to OP&F for pay period ending December 24, 2022. This has since been corrected and Davis's OP&F account is accurate and paid in full. During discussions involving the City Auditor, Director of Public Safety, Chief of Police, and Director of Human Resources, it was agreed by all parties to establish a repayment schedule that lessens the impact on Davis. Therefore, the parties agree as follows:

1. Effective with pay period ending April 1, 2023, a payment plan of $25.00 will be deducted from Davis's bi-weekly pay.

2. The agreed upon payment plan will terminate with pay period ending July 22, 2023 with a final deduction of $5.19.

3. In the event Davis does not have sufficient pay to meet the repayment agreement, he agrees the difference will be paid by means of a personal check.

4. In the event Davis leaves employment prior to fulfilling the payment agreement, the remaining amount owed shall be reimbursed to the City from his final pay or reduced from his pay for any remaining leave balance.

5. The agreement shall be non-precedent setting.

For the City:

Douglas A. DeLong

Date: 03/23/2023

For Douglas A. Davis:

0101

Date: 3/23/2023

City of Circleville

Department of Human Resources
City Administration Building
104 E. Franklin Street
Circleville, OH 43113
740-474-9601
Fax: 740-477-5829

ADJUSTED WORK SCHEDULE REQUEST FORM

An adjusted work schedule may be available on a case-by-case basis and shall only be on a **temporary basis**. An employee is eligible for an adjusted work schedule that would be approved by the Department Director based on the prior yearly evaluation and current employee performance. The Department Director will evaluate the request and decide based on the following factors:

- Impact on the overall organization
- Impact on others within the department
- Length of time in service
- The availability of work based on the request made by the employee

At no time is the Department Director required to approve any request for an alternative work schedule.

Douglas A. Davis	Deputy Chief of Police
Employee Name	Position
Circleville Police Departmnet	Chief G.S. Baer
Department	Department Head

Monday - Friday Dayshift

Normal Work Schedule

Requesting 16 hours of leave due to not being able to use flex time over the past several weeks

Reason for Request

3-28-2023

Requested Start Date of Temporary Adjusted Work Schedule

3-29-2023

Requested End Date of Temporary Adjusted Work Schedule

6101	3-22-2023
Signature of Employee	Date submitted

The Department Head shall consult with HR prior to approval/denial.

☑ Approved ☐ Denied

FLEX HOURS ARE ATTACHED.
CONSULTED WITH HR. APPROVED VACATION.

Comments/Notes

Douglas A. DeBord 3/23/23

Department Director Signature	Date 03/22/23

Submit Form to HR for filing

Revised 6/23/2021

SCANNED

Doug Davis

Flex Time Summary

Date & Time	Overtime Hours
2-24-23	1
2-25-23	5
2-28-23	1
3-2-23	1
3-7-23	1.5
3-8-23	.25
3-9-23	.75
3-14-23	2
3-15-23	1
3-16-23	1
3-20-23	1.5
	Total 16

Respectfully,

Douglas A. Davis

Douglas A. Davis
Deputy Chief of Police
Circleville Police Department
Office: (740) 474-8888
Desk: (740) 302-0083
ddavis@circlevillepolice.com

City of Circleville

Meeting Attendance Record

Meeting: Deputy Chief Davis: OPE F

Location: City Admin Date: 3/21/23 Time: 10 AM

Name (Print)	Signature	Contact Info (if not an employee)
Douglas A. Davis	G101	
Kenneth Fisher		
Valerie Dilley		
Doug DeBord		
C. Shawn Baer		
Mark Bidwell		

Valerie Dilley

From: Valerie Dilley
Sent: Wednesday, March 15, 2023 12:26 PM
To: Deputy Chief Doug Davis
Cc: Chief Shawn Baer; Doug DeBord; Don McIlroy
Subject: OP&F Payment/Reimbursement

Tracking:

Recipient	Read
Deputy Chief Doug Davis	
Chief Shawn Baer	
Doug DeBord	
Don McIlroy	Read: 3/15/2023 8:15 PM

Doug,

The Auditor's office received a notification from OP&F that the City did not correctly account for your pay for the period ending 12/24/2022. As a result, there was no pension taken out of your check for that period, and there was none taken out for the City's share either.

The City will pay OP&F for its share ($645.00) plus your share ($405.19). However, you will need to reimburse the City for your share ($405.19).

We would like to discuss an option for reimbursement that best suits you – a lump sum payment or several payroll deductions over a period of time. Can we meet at 10 AM on 3-21-2023? This is prior to the OPBA LMC meeting and the Auditor will attend to answer any questions you may have.

I apologize for this oversight.

Valerie

Valerie Dilley
Human Resources Director
City of Circleville
104 E. Franklin Street
Circleville, OH 43113
PH: 740-474-9601
FX: 740-477-5829
www.circlevilleoh.gov

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Valerie Dilley

From: Chief Shawn Baer <sbaer@circlevillepolice.com>
Sent: Thursday, March 16, 2023 6:39 PM
To: Valerie Dilley
Subject: Fwd: Payroll Issues

I will call to discuss tomorrow.

From: Doug Davis <ddavis@circlevillepolice.com>
Sent: Thursday, March 16, 2023 2:42 PM
To: Chief Shawn Baer
Subject: Payroll Issues

Chief Baer,

I was notified on March 15, 2023 by Human Resources Director Dilley that there was an issue with my payroll deductions. The email states that OP&F located a discrepancy on my account for the payroll period ending on December 24, 2022. The email states that the Auditors Office did not correctly deduct my OP&F citing there was no pension taken out of my check and the city's share was not taken out either.

According to the email the City would like to pay OP&F for its share which is $645.00 plus my share, which is $405.19. However, it states that I will then need to reimburse the City for my share of $405.19. Human Resources Director Dilley advised that we can meet about this, but I do not understand it. I do not understand why I am reimbursing the city for a mistake on their end. I had also ran into an issue in February, my bank contacted me stating that my truck payment was late. I knew that my payments had been coming out, however the Auditors Office had not been transferring the correct amount for my vehicle loan. The Auditors Office corrected this issue quickly, however this is now the second issue in two months just for me.

I sent an email yesterday about Sergeant Fishers payroll issues and now one about my own. Should there be an audit or some oversight put into place for these issues? There are discrepancies that are not being found for people within our department, I have to believe we aren't the only ones. The city did not even catch my payroll discrepancies, they had to be notified by outside departments.

Please advise on what my next steps should be.

Respectfully,

Douglas A. Davis

Douglas A. Davis
Deputy Chief of Police
Circleville Police Department
Office: (740) 474-8888
Desk: (740) 302-0083
ddavis@circlevillepolice.com

Section 3: Compensation and Hours of Work

Section 3.1 Pay Period

A. There are normally twenty-six (26), two (2) week pay periods each calendar year. By ordinance, the City of Circleville requires direct deposit. Pay advances are not permitted.

B. Certain deductions shall be withheld from employee paychecks as required by law, in accordance with the City's benefits plans or as requested by the employee. Such deductions include retirement system contributions, income taxes, Medicare taxes, medical insurance premiums or other approved deductions (e.g., deferred compensation, child support, etc.). The City may refuse to make deductions not required by law, which the City deems not in its best interest.

C. While the City of Circleville strives to pay our employees correctly, sometimes mistakes can occur. If a mistake has been made, the City, once notified, will promptly make any necessary corrections. Therefore, if you have questions or concerns about any deductions from your paycheck, immediately contact your immediate supervisor, Department Head, Human Resources or the Auditor's office without fear of reprisal. Retaliation will not be tolerated.

D. Reports of alleged improper deductions will be promptly investigated and you will be advised whether the deduction will be reversed. If you are not satisfied with this decision, you may appeal the decision in writing to the Director of Human Resources or the Mayor. If it is determined that an improper deduction took place, you will receive an adjustment on the next regular payday.

Section 3.2 Time Keeping

A. The City of Circleville has developed a standard procedure governing the documentation and recording of compensable employee time in an automated timekeeping system.

B. The City is required by Federal and State law to account for, monitor and maintain accurate timekeeping records. All hourly employees are required to clock in and clock out for all shifts including their lunch periods, if applicable.

C. The Right Stuff (herein after referred to as the timekeeping system) is the software mechanism which must be used by every employee to record their time and attendance that is compensated by the City. This includes actual hours worked as well as hours that will be paid using accrued leave earned by the employee. It is the responsibility of all employees to accurately account for their hours worked and time off based on the requirements of Fair Labor Standards classification.

D. Employees shall submit the appropriate form in the system when time off is requested. Non-preapproved leave must be submitted via the timekeeping system the day the employee returns to work.

E. Employees are not permitted to take unpaid leave unless agreed to and referenced in the employee's hire letter.

F. Bi-weekly compensation paid to the employee through the payroll system will be calculated only on the basis of those hours that have been recorded for the employee and that have been approved in the timekeeping system by the employee's supervisor and department head.

advancement to another position shall not be considered compensable hours of work provided the following criteria are met:

1. Attendance is outside the employee's regular working hours.

2. Attendance is voluntary.

3. The employee does not perform any productive work while attending the training program.

K. For purposes of public accountability, exempt employees may be required to maintain a record of the hours they work and any paid leave utilized must be recorded in the timekeeping sytem.

Section 3.7 Call-in Compensation/Comp Time and Flex-Time

Refer to the appropriate CBA for call-in compensation, comp time accrual and/or usage and "flex-time".

Section 3.8 Payroll Deductions

A. Certain deductions are made from an employee's paycheck as required by law, in accordance with employee benefit plans, or as requested by the employee. These deductions are itemized on the employee's pay statement which accompanies his or her biweekly paycheck. Deductions include:

1. OPERS/OP&F: Except for those persons specifically exempted under provisions of Section 145.03 of the Ohio Revised Code, all employees must contribute to the Public Employees Retirement System or the Ohio Police & Fire Pension Fund rather than Social Security.

2. Income Taxes: Federal, state, and city governments and some school districts may require that income taxes be withheld from each salary payment. The amount of tax to be withheld is determined from tables furnished by the Treasury Department and the Ohio Department of Taxation and may vary according to the amount of salary and number of dependency exemptions. Employees are required to complete withholding tax certificates upon initial employment and to inform the personnel office of any dependency change whenever such change occurs.

3. Miscellaneous Deductions: Examples include child support as order by a Court, garnishments, deferred compensation, credit union savings, health insurance, and other approved deductions. The employer may refuse to make deductions below certain prescribed minimum amounts, or at regular intervals, or for other cause(s) that the City Auditor deems not in the best interests of the City.

Section 3.9 Personnel Files

A. The City of Circleville HR Department is responsible for personal information concerning employees in the employee's official personnel file. "Personal information" includes all information about an employee as defined in ORC 1347.01(E), and may include such information as:

1. Personal data
2. Employment application documents
4. Pre-Employment Examination Results
5. Documentation pertaining to an employee's change of status
6. Performance evaluations

City of Circleville

DIRECT DEPOSIT AUTHORIZATION FORM

I hereby authorize, **CITY OF CIRCLEVILLE**, to initiate credit entries to my account(s) indicated below for recurring payroll transactions. I understand that if corrections in the credit amount are necessary, it may involve an adjustment (credit or debit) to my account. This authority is to remain in full force and effect until written notification from me of its termination in such time in such manner as to allow my employer reasonable time to act on it.

Complete below and attach a voided check (when possible) for each account.

Primary-Net Amou[redacted]

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Second Account

Bank Name: [redacted]

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Amount 482.10 per pay (currently $424.32)

Third Account

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Amount _____

Dodge - 290.42
Signature - 191.68
482.10

Douglas A. Davis
Printed Name

Doug Davis
Signature

Date: 7/5/15

PLEASE CANCEL MY CURRENT DIRECT DEPOSIT-Ch[redacted]

Bank Name: _____

Checking Account Number: _____

Signature: _____ Date: _____

Direct Deposit
Eff. 4/2016

City of Circleville

DIRECT DEPOSIT AUTHORIZATION FORM

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Complete below and attach a voided check or Bank specific letter for each account.

Primary-Net Amount Only

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Second Account

Bank Name [redacted] _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Amount $482.10 a pay being sent currently. It needs to be $494.00 a pay

Third Account

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Amount _____

Douglas A. Davis 6101

Printed Name **Signature**

Date: 2-24-2023

PLEASE CANCEL MY CURRENT DIRECT DEPOSIT-Choice _____

Bank Name: _____

Checking Account Number: _____

Signature: _____ Date: _____

Direct Deposit
Auditor's Office Rev. 9/2019

Please provide your employer with the following information along with a voided check or deposit slip from your checking account.

[redacted] | | | | | | | | | | | | | | | | | | |

Account Number ☐ Checking ☒ Savings

D O U G I A S A D A V I S

Name

[redacted]

Our Routing Number

[redacted]

Tonya

CAN you help me get this taken from my payroll

290.42 bi weekly starting the 29th

FIRST NEEDS WITHDRAWN 3/29

SECOND NEEDS WITHDRAWN 4/12

Thanks

Doug

City of Circleville

DIRECT DEPOSIT AUTHORIZATION FORM

I hereby authorize, **CITY OF CIRCLEVILLE**, to initiate credit entries to my account(s) indicated below for recurring payroll transactions. I understand that if corrections in the credit amount are necessary, it may involve an adjustment (credit or debit) to my account. This authority is to remain in full force and effect until written notification from me of its termination in such time in such manner as to allow my employer reasonable time to act on it.

Complete below and attach a voided check (when possible) for each account.

Primary-Net Amount Only

Bank Name: [redacted]

Checking/Savings Account Number: [redacted]
(Please Circle One of the above choices and include Account number)

Routing Transit Number: [redacted]

Second Account

Bank Name: [redacted]

Checking/Savings Account Number: [redacted]
(Please Circle One of the above choices and include Account number)

Routing Transit Number: [redacted]

Amount 481.58 per pay (currently $424.32)

Third Account

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Amount _____

Douglas A. Davis
Printed Name

Signature

Date: 7/5/15

PLEASE CANCEL MY CURRENT DIRECT DEPOSIT-Choice _____

Bank Name: _____

Checking Account Number: _____

Signature: _____ Date: _____

Direct Deposit
Eff. 4/2016

City of Circleville

DIRECT DEPOSIT AUTHORIZATION FORM

I hereby authorize, **CITY OF CIRCLEVILLE**, to initiate credit entries to my account(s) indicated below for recurring payroll transactions. I understand that if corrections in the credit amount are necessary, it may involve an adjustment (credit or debit) to my account. This authority is to remain in full force and effect until written notification from me of its termination in such time in such manner as to allow my employer reasonable time to act on it.

Complete below and attach a voided check (when possible) for each account.

Primary-Net Amount Only

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Second Account

Bank Name: [redacted]

Checking/Savings Account Number: [redacted]
(Please Circle One of the above choices and include Account number)

Routing Transit Number: [redacted]

Amount 290 42 bi-weekly addl
+133.90
424.32 net

Third Account

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Amount _____

DOUGLAS A. DAVIS — **Printed Name**

Signature

Date: 3/19/19

PLEASE CANCEL MY CURRENT DIRECT DEPOSIT-Choice _____

Bank Name: _____

Checking Account Number: _____

Signature: _____ Date: _____

Direct Deposit
Eff. 4/2016

City of Circleville

DIRECT DEPOSIT AUTHORIZATION FORM

I hereby authorize, **CITY OF CIRCLEVILLE**, to initiate credit entries to my account(s) indicated below for recurring payroll transactions. I understand that if corrections in the credit amount are necessary, it may involve an adjustment (credit or debit) to my account. This authority is to remain in full force and effect until written notification from me of its termination in such time in such manner as to allow my employer reasonable time to act on it.

Complete below and attach a voided check (when possible) for each account.

Primary-Net Amount Only

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Second Account

Bank Name: [redacted]

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Amount $133.90

Third Account

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Amount _____

DOUGLAS DAVIS — 6109

Printed Name **Signature**

Date: 5/1/18

PLEASE CANCEL MY CURRENT DIRECT DEPOSIT-Choice ~~$93.04~~ + $133.90

Bank Name: [redacted]

Checking Account Number: _____

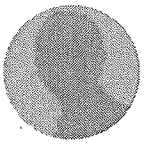
Signature: _____ Date: _____

Direct Deposit
Eff. 4/2016

litmos (/admin/dashboard)

Dashboard
(/admin/dashboard)
Content
(/admin/globalsearch)
People
(/admin/people)
Teams
(/admin/teams)
Reports
(/admin/reports)
Messages
(/messages/inbox)
Help
(https://www.litmos.com/docs/litmos)
Collapse Menu

PEOPLE (/ADMIN/PEOPLE) / DOUG DAVIS



Doug Davis

ddavis@circlevillepolice.com
Captain : Circleville Police Department

Last login was on 2 months ago
Active **Team leader**

(/admin/people/3638765/profile) (/admin/people/3638765/courses) (/admin/people/3638765/certificates) (/admin/people/3638765/learningpaths) (/admin/people/3638765/teams) (/admin/people/3638765/usersessions)

Achievements

HR Annual Training - City of Circleville Additional Work Rules for Supervisors

Download certificate (/achievements/certificate/141188815) Compliant Until 01/05/2024 Achieved on 01/05/2023

HR Annual Training - Drug Free Workplace Policy

Download certificate (/achievements/certificate/141188698) Compliant Until 01/05/2024 Achieved on 01/05/2023

HR Annual Training - City of Circleville Unlawful Discrimination and Harassment Training

Download certificate (/achievements/certificate/141188190) Compliant Until 01/05/2024 Achieved on 01/05/2023

HR Annual Training - Employee Handbook, Effective 5-3-2018; Revised 12-16-2022

Download certificate (/achievements/certificate/141187502) Compliant Until 01/05/2024 Achieved on 01/05/2023

HR Annual Training - Employee Handbook, Effective 5-3-2018; Revised 2-2-2021

Download certificate (/achievements/certificate/97207522) Compliant Until 07/22/2022 Achieved on 07/22/2021

HR Annual Training - Drug Free Workplace Policy

Download certificate (/achievements/certificate/97204841) Compliant Until 07/22/2022 Achieved on 07/22/2021

HR Annual Training - City of Circleville Unlawful Discrimination and Harassment Training

Download certificate (/achievements/certificate/97204739) Compliant Until 07/22/2022 Achieved on 07/22/2021

HR Annual Training - City of Circleville Additional Work Rules for Supervisors

Download certificate (/achievements/certificate/97001223) Compliant Until 07/20/2022 Achieved on 07/20/2021

The Ohio Ethics Law: What Should I Know?

Download certificate (/achievements/certificate/68821437) Compliant Until 07/29/2021 Achieved on 07/29/2020

2020 Employee Handbook, Effective 5-3-2018; Revised 1-1-2020

Download certificate (/achievements/certificate/68821417) Compliant Until 07/29/2021 Achieved on 07/29/2020

2020 Drug Free Workplace Policy - Annual Training for Employees

Download certificate (/achievements/certificate/68821395) Compliant Until 07/29/2021 Achieved on 07/29/2020

2020 City of Circleville Unlawful Discrimination and Harassment Training

Download certificate (/achievements/certificate/68821381) Compliant Until 07/29/2021 Achieved on 07/29/2020

2020 City of Circleville Family & Medical Leave Policy

Download certificate (/achievements/certificate/68821365) Compliant Until 07/29/2021 Achieved on 07/29/2020

2020 City of Circleville Employee Work Rules

Download certificate (/achievements/certificate/68821350) Compliant Until 07/29/2021 Achieved on 07/29/2020

2020 City of Circleville Additional Work Rules for Supervisors

Download certificate (/achievements/certificate/68821322) Compliant Until 07/29/2021 Achieved on 07/29/2020

Cyber Security - Business Email Compromise

Download certificate (/achievements/certificate/52151549) Compliant Until 10/31/2020 Achieved on 11/01/2019

The Ohio Ethics Law: What Should I Know?

Download certificate (/achievements/certificate/44967914) Compliant Until 06/24/2020 Achieved on 06/25/2019

City of Circleville Drug Free Workplace Policy

Download certificate (/achievements/certificate/44967447) Compliant Until 06/24/2020 Achieved on 06/25/2019

The Ohio Ethics Law: What Should I Know?

Download certificate (/achievements/certificate/32816881) Compliant Until 07/02/2019 Achieved on 07/02/2018

City of Circleville Drug Free Workplace Policy

Download certificate (/achievements/certificate/32671042) Compliant Until 06/26/2019 Achieved on 06/26/2018

Employee Handbook, Effective 5-3-2018

Download certificate (/achievements/certificate/31363949) Compliant Until 05/30/2019 Achieved on 05/30/2018

Employee Handbook, Effective 5-3-2018; Revised 4-2-2019

Download certificate (/achievements/certificate/44967826) Compliant Until 05/30/2019 Achieved on 05/30/2018

BF12005 - Stress: Workplace Stress

Achieved on 07/28/2017

The Ohio Ethics Law: What Should I Know?

Download certificate (/achievements/certificate/18629809) Compliant Until 07/07/2018 Achieved on 07/07/2017

BF12015 - Good Housekeeping: Everyone's Responsibility

Download certificate (/achievements/certificate/17963370) Achieved on 06/16/2017

Drug Free Workplace Policy

Download certificate (/achievements/certificate/15926719) Compliant Until 04/12/2018 Achieved on 04/12/2017

BF10103 - Building a Culture of Anti-Bullying for Managers

Download certificate (/achievements/certificate/15459077) Compliant Until 03/28/2018 Achieved on 03/28/2017

BF10210 - Cyber Security: How to Stay Safe Online

Download certificate (/achievements/certificate/12021075) Compliant Until 11/02/2017 Achieved on 11/02/2016

City of Circleville Employee Handbook

Download certificate (/achievements/certificate/8740308) Compliant Until 06/15/2017 Achieved on 06/15/2016

Tami Robison

From: Valerie Dilley
Sent: Friday, February 24, 2023 11:25 AM
To: Tami Robison
Subject: FW: Payroll Deductions
Attachments: SKM_C45823022411210.pdf

Please print this email and the attachment for Doug's file.

From: Doug Davis <ddavis@circlevillepolice.com>
Sent: Friday, February 24, 2023 11:20 AM
To: Mark Bidwell <mbidwell@circlevilleoh.gov>
Cc: Chief Shawn Baer <sbaer@circlevillepolice.com>; Valerie Dilley <vdilley@circlevilleoh.gov>
Subject: Payroll Deductions

Mr. Bidwell

I received a call from my bank last week indicating that my truck payment was late. Obviously this concerned me because I have my payments coming straight from my payroll. I have a vehicle loan and a consolidation loan both coming out of my paycheck and being sent to [redacted] contacted the bank and they advised that for the life of my loans not enough money has been being sent to them. I have been short for the entire life of the loans. I have attached the authorization form to this email.

I need **$494.00** to be sent per pay to the exact same account numbers and routing numbers instead of **$482.10.** No other changes need made except for the dollar amount that is being sent to [redacted] This should not affect my deductions going to the [redacted] at all.

Please let me know if you need anything else form me or if you have any questions.

Thank you for your assistance.

Respectfully,

Douglas A. Davis

Douglas A. Davis
Deputy Chief of Police
Circleville Police Department
Office: (740) 474-8888
Desk: (740) 302-0083
ddavis@circlevillepolice.com

City of Circleville

DIRECT DEPOSIT AUTHORIZATION FORM

I hereby authorize, **CITY OF CIRCLEVILLE,** to initiate credit entries to my account(s) indicated below for recurring payroll transactions. I understand that if corrections in the credit amount are necessary, it may involve an adjustment (credit or debit) to my account. This authority is to remain in full force and effect until written notification from me of its termination in such time in such manner as to allow my employer reasonable time to act on it. Please note you may receive a phone call from the Auditor's Office for verbal verification.

Complete below and attach a voided check or Bank specific letter for each account.

Primary-Net Amount Only

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Second Account

Bank Name [redacted] _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Amount $482.10 a pay being sent currently. It needs to be $494.00 a pay

Third Account

Bank Name: _____

Checking/Savings Account Number: _____
(Please Circle One of the above choices and include Account number)

Routing Transit Number: _____

Amount _____

Douglas A. Davis _____ 6101

Printed Name **Signature**

Date: 2-24-2023

PLEASE CANCEL MY CURRENT DIRECT DEPOSIT-Choice _____

Bank Name: _____

Checking Account Number: _____

Signature: _____ Date: _____

Direct Deposit
Auditor's Office Rev. 9/2019

Valerie Dilley

From: Valerie Dilley
Sent: Tuesday, December 27, 2022 11:08 AM
To: Chief Shawn Baer
Subject: Davis Probationary Period

Deputy Chief of Police Probationary Period: 3-13-2022 to 6-26-2022 (agreed upon date with the Mayor)

Admin leave effective date: 4-11-2022

Extension of Probationary Period Agreement: dated 6-14-2022 to add time spent on admin leave

4-11-2022 to 6-26-2022 = 76 days

Return from admin leave 1-3-2023

1-3-2023 + 76 days = 3-20-2023

End of probationary period is 3-20-2023

Valerie Dilley
Human Resources Director
City of Circleville
104 E. Franklin Street
Circleville, OH 43113
PH: 740-477-8200 ext. 5055
FX: 740-477-5829
www.circlevilleoh.gov

Find us on Facebook!

City of Circleville

Office of the Mayor
City Administration Building
104 E. Franklin Street
Circleville, OH 43113
740-477-8200
Fax: 740-477-8247
www.circleville.oh.us

Donald R. McIlroy
Mayor

June 14, 2022

Deputy Chief of Police Douglas A. Davis
c/o Circleville Police Department
151 E. Franklin Street
Circleville, OH 43113

Deputy Chief Davis,

This letter will serve as notification that upon returning from administrative leave with pay your probationary period, previously set to expire on June 26, 2022, will be extended to include the amount of time spent on administrative leave with pay. This extension is to fairly evaluate your job performance in a position you were appointed to on March 13, 2022.

Signed,
Donald R. McIlroy
Donald R. McIlroy
Mayor/Acting Director of Public Safety

Signature of Acceptance:

6101

Douglas A. Davis

6-16-2022
Date

Valerie Dilley

From: Douglas Davis [redacted]
Sent: Thursday, November 17, 2022 1:31 PM
To: Valerie Dilley
Subject: Re: FW: 2023 Health Insurance Open Enrollment for Full-Time Employees Now thru 11-18-2022

Great!!! Thank you so much. I hope all is well with you

On Thu, Nov 17, 2022 at 1:23 PM Valerie Dilley <vdilley@circlevilleoh.gov> wrote:

This email is fine. I will attach it to your form indicating no change in 2023. Thanks!

From: Douglas Davis [redacted]
Sent: Tuesday, November 15, 2022 10:18 AM
To: Valerie Dilley <vdilley@circlevilleoh.gov>
Subject: Re: FW: 2023 Health Insurance Open Enrollment for Full-Time Employees Now thru 11-18-2022

When is the best day and best time to come in to sign the papers. I plan to just keep what I currently have.

Thanks

On Thu, Nov 10, 2022 at 2:49 PM Valerie Dilley <vdilley@circlevilleoh.gov> wrote:

Doug, I don't think I sent the open enrollment information to you. It is attached.

The City of Circleville will continue health insurance coverage with United Health Care effective January 1, 2023. We are happy to announce that there is no rate increase for the coming year.

To learn more about HRA and HSA coverage, please plan to attend one of the following open enrollment meetings:

Wednesday, November 2, 2022	2:00 PM to 3:00 PM	Circleville Fire Department. 586 N. Court Street
Wednesday, November 9, 2022	7:30 AM to 8:30 AM	Police/Court Basement, 151 E. Franklin Street
Thursday, November 17, 2022	2:30 PM to 3:30 PM	Police/Court Basement, 151 E. Franklin Street

- Any changes to your current enrollment need to be communicated via the open enrollment form (page 1).
    - If you are selecting coverage for the first time, please contact me for the new, first-time enrollment form to return with page 1.
    - If you currently have the regular HRA plan and wish to select the HSA plan during the open enrollment period, please complete the HSA enrollment form and return it with page 1.
    - If you currently have the HSA plan and wish to select the HRA plan, please indicate such on page 1.
- Even if no changes are necessary to your current plan, please indicate that and return page 1 only.

Forms must be returned no later than Friday, November 18th at 4 PM.

Valerie Dilley

Human Resources Director

City of Circleville

104 E. Franklin Street

Circleville, OH 43113

PH: 740-477-8200 ext. 5055

FX: 740-477-5829

www.circlevilleoh.gov

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Valerie Dilley

From: Douglas Davis [redacted]
Sent: Thursday, November 10, 2022 12:41 PM
To: Valerie Dilley
Subject: Re: Public Records Request

Thank you.

On Thu, Nov 10, 2022 at 11:56 AM Valerie Dilley <vdilley@circlevilleoh.gov> wrote:

Only your personnel file was requested from me.

I do not know what else was requested and if those documents are public record. You could ask the Safety Director or Chief.

From: Douglas Davis [redacted]
Sent: Thursday, November 10, 2022 11:53 AM
To: Valerie Dilley <vdilley@circlevilleoh.gov>
Subject: Re: Public Records Request

Am I allowed to ask what else was requested?

On Thu, Nov 10, 2022 at 11:46 AM Valerie Dilley <vdilley@circlevilleoh.gov> wrote:

Doug,

A copy of your personnel file was requested this week. The request is attached.

Jodi released a redacted copy of the file this morning.

Valerie Dilley

Human Resources Director

City of Circleville

104 E. Franklin Street

Circleville, OH 43113

PH: 740-477-8200 ext. 5055

FX: 740-477-5829

www.circlevilleoh.gov

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Valerie Dilley

From: Valerie Dilley
Sent: Thursday, November 10, 2022 11:47 AM
To: Douglas Davis
Subject: Public Records Request
Attachments: 2022 11-7 Pick Co Prosecutor - Davis File.pdf

Doug,

A copy of your personnel file was requested this week. The request is attached.

Jodi released a redacted copy of the file this morning.

Valerie Dilley
Human Resources Director
City of Circleville
104 E. Franklin Street
Circleville, OH 43113
PH: 740-477-8200 ext. 5055
FX: 740-477-5829
www.circlevilleoh.gov

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City of Circleville

PUBLIC RECORDS REQUEST

Ohio law does not require disclosure of your identity or intended use of requested records nor does it require that a request be in writing. However, a public office may ask that a request be in writing, disclosing the identity of the requestor and/or stating the intended use, when a written request, disclosure or intended use would enhance the ability to comply with the request. Completing this form will help us promptly fulfill your request within a reasonable amount of time. Regular business hours are Monday - Friday 7:30 a.m. to 4:00 p.m.

Note: For black and white photocopies of either letter or legal size documents, the fees shall be as follows: the 1st thru the 5th copy will be provided at no charge to the requestor. Beginning with the 6th copy provided there is a charge of ten cents ($.10) per copy. *Advance payment, including the cost of USPS regular mail postage, is required before any copies are prepared.*

REQUESTOR INFORMATION			
Name Heather Carter		Agency/Company Pickaway Co. Asst. Prosecutor	
Address		City, State, Zip	Daytime Phone (with area code)
Date of Request 11-7-2022	Time of Request 10:22 AM	Signature See attached	

Please provide your request below & indicate your preferred method of receipt of your request.
See attached email

For City of Circleville use only		
Received By: V. Dilley	Date/Time Received: 11-7-2022 10:56A	Forwarded to Department of: Law Director
Date submitted for Legal Review: 11-7-2022	Submitted by: Valerie Neeley	

Legal Reviewer: Please complete the following section and return to the submitter.

☐ Request Approved with the recommended redactions: _____

☐ Request Denied: Reason _____

_____

Date of Review:	Signature of Legal Reviewer:

To be completed by the appropriate department fulfilling the request			
Date Request Fulfilled	Fulfilled by	Number of Copies _____ Amount Charged $_____	☐ Cash ☐ Check #_____

Ohio law provides that public records, except certain statutory exceptions, must be available at reasonable times during regular business hours. Upon request, the City of Circleville is afforded a reasonable period of time to assemble and organize these records, and have an attorney review and authorize each request before it is released. If any requested records are exempt from disclosure, the records, or parts thereof, will be withheld or redacted and you will provided with a statement for such action.

Valerie Dilley

From: Valerie Dilley
Sent: Monday, November 7, 2022 10:56 AM
To: Heather MJ Carter
Subject: RE: Discovery Demand
Attachments: Public Records Request Rev 3-2017.pdf

Hi Heather,

Your email is sufficient for a public records request. It will be attached to the public records request form and forwarded to the Law Director for review.

If the information is approved for release, may I send the file to this email address? If so, there isn't a charge for copies.

Valerie

From: Heather MJ Carter <hcarter@pickawaycountyohio.gov>
Sent: Monday, November 7, 2022 10:22 AM
To: Valerie Dilley <vdilley@circlevilleoh.gov>
Subject: Discovery Demand

Good morning!

I am prosecuting a case (State of Ohio vs. Dylan Lintz), and the attorney (Matthew O'Leary) has filed a demand for additional discovery in relation to a motion to suppress he plans to file in this case. Mr. O'Leary has made a formal request for a copy of the personnel file of Doug Davis, who was involved in this case. What do I need in order to get this request fulfilled? There were a number of other items, so I sat down with Det. Farrelly today to go over them, and he directed me to you regarding this particular request. Thanks!

Heather

Heather MJ Carter
Pickaway County Assistant Prosecutor
P.O. Box 910
203 South Scioto Street
Circleville, Ohio 43113
(740) 474-6066 - phone
(740) 477-7475 - fax
hcarter@pickawaycountyohio.gov

Valerie Dilley

From: Gary Kenworthy <lawdirector@rrohio.com>
Sent: Wednesday, November 9, 2022 5:19 PM
To: Valerie Dilley
Subject: RE: Public Records Request Review

Valerie,

The indicated public records should be good to release except for anything that is still under his pending investigation and personal information.

Thanks,

Gary D. Kenworthy

Gary D. Kenworthy
City Law Director
443 N. Court Street, P.O. Box 574
Circleville, Ohio 43113
(740) 477-2536

From: Valerie Dilley <vdilley@circlevilleoh.gov>
Sent: Monday, November 7, 2022 11:20 AM
To: lawdirector@rrohio.com
Subject: Public Records Request Review

Gary,

Please review the attached request.

Thanks,
Valerie

Valerie Dilley
Human Resources Director
City of Circleville
104 E. Franklin Street
Circleville, OH 43113
PH: 740-477-8200 ext. 5055
FX: 740-477-5829
www.circlevilleoh.gov

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 Virus-free.www.avast.com

City of Circleville

Department of Human Resources

City Administration Building
104 E. Franklin Street
Circleville, OH 43113
740-474-9601
Fax: 740-477-5829
www.circlevilleoh.gov

Donald R. McIlroy
Mayor

Valerie Dilley
Director

MEMORANDUM

TO: Doug Davis, Deputy Chief of Police

RE: 2023 Pay Increase

FROM: Valerie Dilley, HR Director

DATE: October 17, 2022

COPY: HR Personnel File

With the passage of Ordinance #10-76-2022 on October 4, 2022, your 2023 bi-weekly salary will increase to $3,473.09 effective January 1, 2023. This is a 5% increase.

PICKAWAY COUNTY CSEA
1005 S PICKAWAY STREET
P.O. BOX 610
CIRCLEVILLE, OH 43113

Telephone Number: (740) 474-7588
Toll Free Number: 1-800-822-5437
Fax Number: (740) 474-9333

2022 JUN 23 AM 9:48

000710
CITY OF CIRCLEVILLE
104 E FRANKLIN ST
CIRCLEVILLE, OH 43113-1718

SE2215800200071040010G

Attention Employers: An employer resource guide is available that outlines employer responsibilities and provides answers to commonly asked employer questions. Please visit the Ohio Office of Child Support website at **jfs.ohio.gov/ocs** and click on the Employer Information link to download a copy.

INCOME WITHHOLDING FOR SUPPORT

OMB 0970-0154
Expiration Date: 09/30/2023

I. Sender Information: (Completed by the Sender)

Date: 06/08/2022

☐ INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT
☒ AMENDED IWO
☐ (IWO) ONE-TIME ORDER/NOTICE FOR LUMP SUM PAYMENT
☐ TERMINATION OF IWO

☒ Child Support Enforcement (CSE) Agency ☐ Court ☐ Attorney ☐ Private Individual/Entity (Check One)

NOTE: This IWO must be regular on its face. Under certain circumstances you must reject this IWO and return it to the sender (see IWO instructions www.acf.hhs.gov/css/resource/income-withholding-for-support-instructions). If you receive this document from someone other than a state or tribal CSE agency or a court, a copy of the underlying support order must be attached.

State/Tribe/Territory: Ohio
City/County/Dist./Tribe: PICKAWAY COUNTY CSEA
Private Individual/Entity:

Remittance ID (incl w/pymt): [redacted]
Order ID:
Case ID: [redacted]

II. Employer and Case Information: (Completed by the Sender)

CITY OF CIRCLEVILLE
Employer/Income Withholder's Name
104 E FRANKLIN ST
Employer/Income Withholder's Address

CIRCLEVILLE, OH 43113-1718

Employer/Income Withholder's FEIN 316400222

RE: DAVIS, DOUGLAS A
Employee/Obligor's Name (Last, First, Middle)
[redacted]
Employee/Obligor's Social Security Number
01/29/1980
Employee/Obligor's Date of Birth
[redacted]
Custodial Party/Obligor's Name (Last, First, Middle)

Child(ren)'s Name(s) (Last, First, Middle)	Child(ren)'s Birth Date(s)
[redacted]	07/19/2005

SE22158002000710402OG

III. ORDER INFORMATION: (Completed by the Sender)

This document is based on the support order from **Ohio** (State/Tribe). You are required by law to deduct these amounts from the employer/obligor's income until further notice.

$187.77	Per **MONTH** current child support	
$0.00	Per **MONTH** past-due child support -	Arrears greater than 12 weeks? ☐ Yes ☒ No
$0.00	Per **MONTH** current cash medical support	
$0.00	Per **MONTH** past-due cash medical support	
$0.00	Per **MONTH** current spousal support	
$0.00	Per **MONTH** past-due spousal support	
$3.76	Per **MONTH** other (must specify)	2% process chrg & other obligations

for a **Total Amount to Withhold** of **$191.53** per **MONTH.**

IV. AMOUNTS TO WITHHOLD: (Completed by the Sender)

You do not have to vary your pay cycle to be in compliance with the *Order Information*. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

$44.20	per weekly pay period	$95.77	per semimonthly pay period (twice a month)
$88.40	per biweekly pay period (every two weeks)	$191.53	per monthly pay period

Lump Sum Payment: Do not stop any existing IWO unless you recieve a termination order.

Withholder's Name: CITY OF CIRCLEVILLE
Withholder's FEIN: 316400222
Employee/Obligor's Name: DOUGLAS A DAVIS
SSN: [redacted]
Case Id: [redacted]
Order Id:

V. Remittance Information: (Completed by the Sender except for the "Return to Sender" checkbox.)

If the employee/obligor's principal place of employment is Ohio, you must begin withholding no later than the first pay period that occurs 14 days after the date of mailing of the order/notice. Send payment within 7 business days of the pay date. If you cannot withhold the full amount of support for any or all orders for this employee/obligor, withhold 50% of disposable income for all orders. If the employee/obligor's principal place of employment is not Ohio, obtain withholding limitations, time requirements, the appropriate method to allocate among multiple child support cases/orders and any allowable employer fees from the jurisdiction of the employee/obligor's principal place of employment.

State-specific withholding limit information is available at www.acf.hhs.gov/css/resource/state-income withholding-contacts-and-program-requirements. For tribe-specific contacts, payment addresses, and withholding limitations, please contact the tribe at www.acf.hhs.gov/sites/default/files/programsfcss/ tribal agency contacts printable pdf.pdf or https://www.bia.gov/tribalmap/DataDotGovSamples/tld map.html.

You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (CCPA) (15 USC 1673(b)); or 2) the amounts allowed by the law of the state of the employee/obligor's principal place of employment, if the place of employment is in a state; or the tribal law of the employee/obligor's principal place of employment if the place of employment is under tribal jurisdiction. The CCPA is available at www.dol.gov/sites/dolgov/files/WH D/legacy/fi les/garnOl .pdf. If the ***Order information*** section does not indicate that the arrears are greater than 12 weeks, then the employer should calculate the CCPA limit using the lower percentage.

If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to federal, state, or tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support.

If the obligor is nonemployee, obtain withholding limits from the Supplemental Information section in this IWO. This information is also available at http://www. acf.hhs.gov/css/resource/state-income-withholding-contacts -and-program-requirements.

Remit payment to OHIO CHILD SUPPORT PAYMENT CENTRAL (CSPC)
at P.O. BOX 182394, COLUMBUS, OHIO 43218-2394

Include the Remittance ID with the payment and if necessary this locator code of the SDU/Tribal order payee 39129 on the payment.

To set up electronic payments or to learn state requirements for checks, contact the State Disbursement Unit (SDU). Contacts and information are found at http://www.acf.hhs.gov/css/resource/edu-eft-contacts and-program-requirements.

☐ **Return to Sender (Completed by Employer/Income Withholder).** Payment must be directed to an SDU in accordance with sections 466 (b)(5) and (6) of the Social Security Act or Tribal Payee (see Payments to Section IV). If payment is not directed to an SDU/Tribal Payee or this IWO is not regular on its face, you *must* check this box and return the IWO to the sender.

If Required by State or Tribal Law:

Signature of Judge/Issuing Official:	**Not required by Ohio law**
Print Name of Judge/Issuing Official:	LISA M LEACH
Title of Judge/Issuing Official:	**Authorized Representative**
Date of Signature:	06/08/2022

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to provide uniformity and standardization. Public reporting burden for this collection of information is estimated to average two to five minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information in accordance with 45 CFR 303.100 of the Child Support Enforcement Program. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid 0MB control number. If you have any comments on this collection of information, please contact the Employer Services Team by email at employerservicescact.hhs.gov.

Withholder's Name: CITY OF CIRCLEVILLE
Withholder's FEIN: 316400222
Employee/Obligor's Name: DOUGLAS A DAVIS
SSN: [redacted]
Case Id: [redacted]
Order Id:

If the employee/obligor works in a state or for a tribe that is different from the state or tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.

☐ If checked, the employer/income withholder must provide a copy of this form to the employee/obligor.

VI. Additional Information for Employers/Income Withholders: (Completed by the Sender)

Priority: Withholding for support has priority over any other legal process under State law against the same income (section 466(b)(7) of the Social Security Act). If a federal tax levy is in effect, please notify the sender.

Payments: You must send child support payments payable by income withholding to the appropriate State Disbursement Unit or to a tribal CSE agency within 7 business days after the date the income would have been paid to the employee/obligor and include the date you withheld the support from his or her income. You may combine withheld amounts from more than one employee/obligor's income in a single payment as long as you separately identify each employee/obligor's portion of the payment.

Lump Sum Payments: You may be required to notify a state or tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments. Employers/income withholders may use OCSE's Child Support Portal (ocsp.acf.hhs.gov/csp/) to provide information about employees who are eligible to receive lump sum payments and to provide contacts, addresses, and other information about their companies. Child support payments may not be made through the federal OCSE Child Support Portal.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by state or tribal law/procedure.

Anti-discrimination: You are subject to a fine determined under state or tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO.

Supplemental Information:
Ohio's supplemental information is contained in this section.

STOP PAYMENT: You must confirm that the payment has not already been processed by CSPC prior to stopping payment on a check remitted to CSPC. In addition, you must submit a stop payment affidavit within two business days to OHSDU.financeSMlmail.net, indicating that the check was lost or stolen.

ORDER INFORMATION: In accordance with Ohio Revised Code (ORC) section 3121.03, you are required to: Implement the withholding no later than the first pay period that occurs after 14 business days following the date the notice was mailed or transmitted, and are required to continue the withholding at the intervals specified in the notice until further notice from the court or child support enforcement agency (CSEA); and send the amount withheld immediately but not later than 7 business days after the date the obligor is paid. Withholding under this order is binding until further notice from the court or CSEA.

PRIORITY: In accordance with ORC section 3121.034, except for deductions from lump sum payments made in accordance with section 3121.0311 of the Revised Code, withholding in accordance with this notice has priority over any other legal process under the law of this state against the same income.

EMPLOYERS WITH 50 OR MORE EMPLOYESS: In accordance with ORC section 3121.19, if you are an employer that employs more than 50 employees, you are required to submit withholding amounts to the state via electronic transfer and combine all of the payments to be forwarded in one payment. The payment shall clearly identify: each employee/obligor covered by the payment; each child support case number covered by the payment; and the portion of the payment attributable to each employee/obligor and case number.

COMBINING PAYMENTS: In accordance with ORC section 3121.20, a payor required to withhold a specified amount from the income of more than one obligor under a withholding notice and to forward the amounts withheld or deducted to the office of child support may combine all of the amounts to be forwarded in one payment if the payment is accompanied by a list that clearly identifies all of the following: Each obligor covered by the payment; each child support case, numbered as provided on the withholding or deduction notice, that is covered by the payment; and the portion of the payment attributable to each obligor and each case number.

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Withholder's Name: CITY OF CIRCLEVILLE
Withholder's FEIN: 316400222
Employee/Obligor's Name: DOUGLAS A DAVIS
SSN: [redacted]
Case Id: [redacted]
Order Id: [redacted]

LUMP SUM PAYMENTS: In accordance with ORC section 3121.037, no later than the earlier of 45 days before the lump sum payment is to be made or, if the obligor's right to the lump sum payment is determined less than 45 days before it is to be made, the date on which the determination is made, you are required to notify the child support enforcement agency administering the support order of any lump sum payment of any kind of $150 or more that is to be paid to the obligor, hold each lump sum payment of $150 or more for 30 days after the date on which it would otherwise be paid to the obligor and, on order of the court or agency that issued the support order, pay all or a specified amount of the lump sum payment to the office of child support.

EMPLOYEE/OBLIGOR WITH MULTIPLE SUPPORT WITHHOLDINGS: In accordance with ORC section3121.034, when two or more withholding notices are received by a payor, the payor shall comply with all of the requirements contained in the notices to the extent that the total amount withheld from the obligor's income does not exceed the maximum amount permitted under section 303(b) of the "Consumer Credit Protection Act," 1673(b), withhold amounts in accordance with the allocation set forth below, notify each court or CSEA that issued one of the notices of the allocation, and give priority to amounts designated in each notice as current support in the following manner:

- If the total of the amounts designated in the notices as current support exceeds the amount available for withholding under section 303(b) of the "Consumer Credit Protection Act," 1673(b),the payor shall allocate to each notice an amount for current support equal to the amount designated in that notice as current support multiplied by a fraction in which the numerator is the amount of income available for withholding and the denominator is the total amount designated in all of the notices as current support.
- If the total of the amounts designated in the notices as current support does not exceed the amount available for withhholding under section 303(b) of the "Consumer Credit Protection Act,"1673(b), the payor shall pay all of the amounts designated as current support in the notices and shall allocate to each notice an amount for past-due support equal to the amount designated in that notice as past-due support multiplied by a fraction in which the numerator is the amount of income remaining available for withholding after the payment of current support and the denominator is the total amount designated in all of the notices as past-due support.

NOTICE OF TERMINATION OF EMPLOYMENT: In accordance with ORC section 3121.037, you must promptly notify the CSEA administering the support order, in writing, within 10 business days after the date of any situation that occurs in which the payor ceases to pay income to the obligor in an amount sufficient to comply with the order, including termination of employment, layoff of the obligor from employment, any leave of absence of the obligor from employment without pay, termination of workers' compensation benefits, or termination of any pension, annuity, allowance, or retirement benefit. Include with the notification:

- The obligor's last known address and telephone number; the obligor's date of birth, social security number, and case number; if known, the name, telephone number, and business address of any new employer or income source.
- Identify any types of benefits other than personal earnings the obligor is receiving or is eligible to receive as a benefit of employment or as a result of the obligor's termination of employment, including, but not limited to, unemployment compensation, workers' compensation benefits, severance pay, sick leave, lump sum payments of retirement benefits or contributions, and bonuses or profit-sharing payments or distributions, and the amount of the benefits.

FEE: In accordance with ORC section 3121.18, a payor ordered to withhold a specified amount from the income of an employee under a withholding notice may deduct from the income of the person, in addition to the amount withheld for purposes of support, a fee of the greater of $2 or an amount not exceeding 1% of the amount withheld as a charge for its services in complying with the withholding notice.

EFT: For EFT/EDI instructions, contact CSPC at 1-888-965-2676 or go to:
http://jfs.ohio.gov/Ocs/employers/Employerinformation.stm

Bureau of Workers' Compensation Claim Number: _____

Withholder's Name: CITY OF CIRCLEVILLE Withholder's FEIN: 316400222

Employee/Obligor's Name: DOUGLAS A DAVIS SSN: [redacted]

Case Id: [redacted] Order Id:

VII. NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS: (Completed by the Employer/Income Withholder)

If this employee/obligor never worked for you or you are no longer withholding income for this employee/obligor, you must promptly notify the CSE agency and/or the sender by returning this form to the address listed in the **Contact Information** section below or using OCSE's Child Support Portal (https://ocsp.acf.hhs.gov/csp/). It the employee/obligor is receiving workers' compensation, you may report the new income withholder, if known.

☐ This person has never worked for this employer nor received periodic income.

☐ This person no longer works for this employer nor receives periodic income.

Please provide the following information for the employee/obligor:

Termination date: _____ Last known telephone number: _____

Last known address: _____

_____

Final payment date to SDU/Tribal Payee: _____ Final payment amount: _____

New employer's name: _____

New employer's address: _____

_____

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VIII. CONTACT INFORMATION: (Completed by the Sender)

To Employer/Income Withholder: If you have questions, contact

LISA M LEACH by telephone: 1-800-822-5437 by fax: (740) 474-9333

by email or website: _____

Send termination/income status notice and other correspondence to : PICKAWAY COUNTY CSEA
1005 S PICKAWAY STREET, P.O. BOX 610 CIRCLEVILLE, OH 43113

To Employee/Obligor: If the employee/obligor has questions, contact

LISA M LEACH by telephone: 1-800- 822-5437 by fax: (740) 474-9333

by email or website: _____

IMPORTANT: The person completing this form is advised that the information may be shared with the employee/obligor.

Encryption Requirements:
When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to emails, may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

RECEIVED
APR 29 2022

City of Circleville
Police Department

Read and Sign

Information Attached: Unlawful Discrimination & Harassment
Date Posted: 4/4/2022 Posted By: Farrelly / HR

Unit #	Officer/Employee	Signature	Unit #	Officer/Employee	Signature
01	Roar, Phil	6101	26	Johansen, Jacob	Ofc. Johansen 6126
02	Davis, Doug		27	Conver, William	6127
03			28	Maher, Dan	6128
04	McIntyre, Dave		29	Patterson, Trent	
05	Fisher, Ken	6105	30	Wears, Mike	
06	Oberer, Isaac		31	McCoy, Kenny	
07	Farrelly, Jon	6107	32		
08	Nicholson, Eric		33		
09	Harrell, Matt	6109	34	Hicks, Thad	
10			35	Beavers, Brandy	
11	Salyers, Ashton	6111	36	Royster, Tom	
12	Estrada, Alex	6112	37	Debord, Doug	
13			38		
14	Sanford, Tim	6114	39		
15	Murphy, Pat	6115	40		
16	Harrell, Matt				
17			60	Hunter, Kim	
18	Merritt, Josh		61	Bickers, Anthony	
19	Mays, Ryan	6119	62	Puckett, Danielle	
20	VanFossen, Tate	6120	63	Collins, Ryan	
21	Hopkins, Tyler	6121	64	Wamsley, Mabel	6164
22	Speakman, Ryan		65	Briggs, Braydon	
23	Yoder, Kory	#6123	66	Stringfield, Amanda	
24	Fox, Dustin	Ofc. #6124	70	Francis, Mark	
25	Merritt, John	6125	73	Chapman, Jodi	
	Verified by G.S Baer				

City of Circleville

Police Department

151 East Franklin Street
Circleville, Ohio 43113
Police Services (740) 477-8208 • Offices (740) 477-8221 • Fax (740) 474-8880

G. Shawn Baer, Chief of Police
Philipp L. Roar, Deputy Chief of Police
Douglas A. Davis, Captain – Special Operations Unit

Internal Affairs #: IA2022_000037
Citizen Complaint #:
Supervisor: G. Shawn Baer
IA Assigned: G. Shawn Baer

Date: 4/11/2022

Dear Douglas Davis

You are being placed on administrative leave with pay starting immediately 4/11/2022. You are to turn over your duty weapon, all CPD identification, keys and proximity card. You will not act in any capacity as a City of Circleville Police Officer while on administrative leave. Without prior approval from me or my designee you will not be at the Circleville Police Department or other city building unless conducting business as a citizen.

This is a result of an incident on or about Feb 2022

You are not to discuss any part of this with anyone other than your union representative. You will be contacted to further discuss this promptly. You should make yourself available while on administrative leave if contacted by a representative of the Circleville Police Department. If you have any questions or concerns, please contact me.

Respectfully,

G. Shawn Baer

City of Circleville

Police Department

151 East Franklin Street
Circleville, Ohio 43113
Police Services (740) 477-8208 • Offices (740) 477-8221 • Fax (740) 474-8880
G. Shawn Baer
Chief of Police

April 8, 2022

Chief G. Shawn Baer,

I believe this is the right thing to do. I feel that this is the appropriate way and time for me to submit this letter to you and to the administration of the city of Circleville.

There are many things happening in this city and here in this department that I am no longer willing to accept. I have vowed to myself and to my family that I will no longer put myself or them through the things that are taking place.

First, I would like to say I have achieved everything possible and anything that I have ever dreamed of from this department. I have had some of the finest years of my law enforcement career here. I would like to personally thank you for that and for always believing in me.

However, I will be seeking employment elsewhere. I do not have a destination yet, but you will be the first to know when and where I intend to go. I will give you ample time to replace me and for me to train my replacement.

I am disheartened to be submitting this, but I feel that my health and wellbeing supersede all else.

Respectfully,

Douglas A. Davis
Deputy Chief of Police

City of Circleville

Department of Human Resources
City Administration Building
104 E. Franklin Street
Circleville, OH 43113
740-474-9601
Fax: 740-477-5829
www.circlevilleoh.gov

Controlled Substance and/or Alcohol Test Notification

You have been randomly selected for testing

City of Circleville ☐ DOT ☑ NON-DOT

Type of Test ☐ Alcohol ☑ Controlled Substance

Employee Douglas A. Davis

Testing Site: OhioHealth Berger
Occupational Health
1434 Circleville Plaza
Circleville, OH 43113
740-420-6133

Hours: Monday–Friday 8:30 AM-3 PM

49 CFR 382.113- Notification Requirements
Before performing an Alcohol or Controlled Substance test under this part, each employer shall notify a driver/employee that the alcohol and/or controlled substance test is required by this part.

Compliance is Mandatory
You are hereby notified that you must submit to the above listed test(s) in compliance with the Federal Regulations. Pursuant to those regulations, YOU MUST PROCEED DIRECTLY AND IMMEDIATELY to the testing location listed above.

SPECIAL INSTRUCTIONS TO DRIVER
Present this notice with your photo I.D. to clinic staff and please cooperate with clinic staff at all times. Return a signed copy to HR via email or fax.

Declaration of Agreement
I understand as a condition of my employment, compliance with the above scheduled test(s) is required.

Expected Testing Date Wed. 3/30/2022

Valorie Miller — 3/30/2022
City HR Representative Signature — Date/Time Notified

Employee Signature — Date/Time Notified

Supervisor (or designee) Signature — Date/Time employee left worksite

City of Circleville

Police Department

151 East Franklin Street
Circleville, Ohio 43113
Police Services (740) 477-8208 • Offices (740) 477-8221 • Fax (740) 474-8880

G. Shawn Baer
Chief of Police

Philipp L. Roar
Deputy Chief of Police

Douglas A. Davis
Captain – Special Operations Unit

March 3, 2022

Mayor McIlroy,

First and foremost, thank you for the official letter offering me the Deputy Chief position for the Circleville Police Department. I am honored to continue to serve under your administration and for the citizens of this community. As stated in the meeting this morning I have found my "home" here at the Circleville Police Department. I have been employed with the city since 2013 and will be here until at least my retirement date in 2036.

I have spoken to Mrs. Dilley about a few things in the past few days. I had asked for the probationary period to be ran along with my current probationary status. I wanted to thank you for allowing that to happen. I also had asked for an increase in yearly salary to $86,000. The reason for the increase is due to the extra hours that I put in without compensation. There are a lot of additional things that I do for the department and for the citizens, that I am unable to be compensated for. I understand that the salaries are already allotted for, but I wanted to state my case and ask. The final thing I had asked was for a right to first refusal on the Chief of Police position when it becomes available. I would be testing against other candidates that have college degrees and seniority bonus points. I have reached out to several colleges and am going to enroll soon to obtain an associate degree in Criminal Justice.

In closing mayor, I again want to thank you. You have always been there for me and for the Police Department and for that I am beyond appreciative. I am hopeful that my list of desires above does not offend you or Mrs. Dilley. They are just questions that I wanted to present to you to see if you could help me with.

Please let me know if you have any questions or concerns.

Respectfully,

6102

Douglas A. Davis
Acting Deputy Chief
Circleville Police Department

Jenn Noble

Subject: FW: Documentation Davis File
Attachments: 2024 3-22 File Davis, Doug.pdf

From: Tami Robison <trobison@circlevilleoh.gov>
Sent: Friday, March 22, 2024 11:24 AM
To: Jenn Noble <jnoble@circlevillelaw.com>; Valerie Dilley <vdilley@circlevilleoh.gov>
Subject: RE: Documentation Davis File

Tami Robison

Human Resources
Administrative Assistant
City of Circleville
104 E. Franklin Street
Circleville, OH 43113
(740) 477-8200 ext. 5054
trobison@circlevilleoh.gov

From: Valerie Dilley <vdilley@circlevilleoh.gov>
Sent: Friday, March 22, 2024 9:56 AM
To: Jenn Noble <jnoble@circlevillelaw.com>
Subject: RE: Documentation Davis File

Tami has the oath and supporting documents and a few other items. She will send those to you momentarily.

From: Jenn Noble <jnoble@circlevillelaw.com>
Sent: Friday, March 22, 2024 9:03 AM
To: Valerie Dilley <vdilley@circlevilleoh.gov>; Tami Robison <trobison@circlevilleoh.gov>
Subject: Documentation Davis File

Are there any documents in Doug's file that I do not have since Wilkinson's request?

Jenn Noble, Civil Administrative Assistant
Kendra C. Kinney, City Law Director
158 E. Franklin Street
Circleville, Ohio 43113
740-477-8226