

**MANATEE COUNTY SHERIFF'S OFFICE
SERVICES BRANCH
EMPLOYEE SERVICE RECORD**

<div> <div>WATSON-DUGAN</div> <div>APRIL</div> <div>MICHELLE</div> <div>D-86</div> </div> <div> <div>(Last Name)</div> <div>(First Name)</div> <div>(Middle Name)</div> <div>I.D. Number</div> </div>			
DATE	PERSONNEL ACTION	REMARKS	
05/05/97	NEW APPOINTMENT AS L/E DEPUTY, TRU UNIT		
09-30-97	APPROVED SALARY INCREASE		
10-14-97	TRANSFER TO L/E DEPUTY, FTEP UNIT, DISTRICT #3		
01-20-98	TRANSFER TO SQUAD #3 WEST, DISTRICT II , COMPLETED FTEP		
05-26-98	TRANSFER TO L/E DEPUTY, SQUAD #3E, DISTRICT #3		
05-10-99	APPROVED SALARY INCREASE		
11-23-99	COLLATERAL DUTY AS AN ASSOCIATE ADVISOR FOR MCSO EXPLORER POST		
2-1-2000	TRSF:L/E DEPUTY,SQD#4E,SECTION FOUR,DISTRICT#3		
4-25-2000	ANNUAL PAY INCREASE		
10-10-00	TRANSFER:L/E DEPUTY,SQUAD #6E, SECTION SIX, DISTRICT #3		
2-27-01	TEMPORARY TRANSFER- 3 MONTHS OR LESS:COPS DEPUTY,COPS TASK FORCE UNIT		
4-24-01	ANNUAL PAY INCREASE		
10-2-01	TRANSFER:PATROL DEPUTY,DIST#3,SQD#6E		
10-23-01	TRANSFER:BURGLARY DETECTIVE,PROPERTY CRIMES SECTION,CID DIVISION		
4-23-02	TRANSFER:CRIMES AGAINST JUVENILES DETECTIVE,CID DIVISION		
4-23-02	ANNUAL PAY INCREASE		
10-7-03	PROMOTION:DEPUTY SECOND CLASS,CHILD PROTECTION SECTION,CAC UNIT		
2-9-04	OTHER:APPOINTMENT TO MOUNTED PATROL		
5-31-04	OTHER:RESIGNATION FROM MOUNTED PATROL		
8-24-04	TRANSFER:DETECTIVE,PROPERTY CRIMES SECTION,BURGLARY UNIT		
10-5-04	ANNUAL PAY INCREASE		
3-29-05	OTHER:POSITION/TITLE APPOINTMENT AS MEMBER OF CERT/TACT, SPECIAL TEAM BUREAU		
5-31-05	DISCIPLINARY ACTION:#1583,8.6 HR SUSPENSION W/O PAY G.O.1013,2.11.2.4		
6-14-05	TRANSFER:PATROL DEPUTY,SQUAD 6W,SECTION 6, D-3 DIV.		
10-4-05	ANNUAL PAY INCREASE		

MCSO FM 87-081 (Rev 06/99)



[illegible]

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20283
RECEIVED

FEB 05 1997

PERSONNEL SECTION

Revised 3/96

SHERIFF'S OFFICE

LAW ENFORCEMENT EMPLOYMENT APPLICATION FORM

The Sheriff's Office is an Equal Employment Opportunity Employer. We consider applicants for all positions without regard to race, color, national origin, sex, age, disability, marital status, religion or any other legally protected status.

NOTICE: The following additional documents must be attached to this application:

1. A certified copy of birth certificate
2. A certified copy of high school diploma or Florida Police Standards approved G.E.D.
3. A copy of military discharge(s).

MANATEE

COUNTY

DATE: 1-25-97

POSITION APPLYING FOR:

- ☒ Deputy Sheriff
- ☐ Correctional Officer
- ☐ Law Enforcement Academy Sponsorship or Internship
- ☐ Law Enforcement Related Non-Certified Positions
(Other positions use other application form)

INSTRUCTIONS

Application must be typewritten or printed legibly in ink. All questions must be answered. Applications which are not complete will not be considered. If space provided is not sufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application, and number answers to correspond with questions.

I understand that the submission of this application for sponsorship to a law enforcement academy does not constitute an application for employment or appointment with the sponsor-law enforcement agency. Moreover, I understand this law enforcement agency is under no obligation to sponsor me as a candidate for any law enforcement training program.

PERSONAL HISTORY

1. Full Name:

Watson-Dugan April Michelle
Last Name First Middle Abbv.

2. Other: List all other names you have used including circumstances and time periods you used them. (For example: maiden name, former name(s), alias(es), or nickname(s).)

Name	Circumstance	Dates From Mo./Yr.	Dates To Mo./Yr.
April M. Watson	maiden name	9/73	10/95

3. Date and Place of Birth:

Date of Birth _____ City _____ / _____ County _____ State _____ Country (if not the United States) _____

4. Are you a United States citizen? ☒ Yes ☐ No

If naturalized, please provide:

Date

Place

Court

Naturalization No.

5. Social Security Number: _____

6. Marital Status: ☒ Married ☐ Divorced ☐ Separated ☐ Widowed ☐ Never Married7. Do you have or have you ever applied for a passport? ☐ Yes ☒ No Passport No. _____8. Height: 5' 5" Weight: 175 lbs.

EDUCATION/TRAINING

1.	High School Name/Address	Dates Attended Mo./Yr.		Years Completed	Did You Graduate?	Type of Diploma
		From	To			
	Graether High School 16200 N. Dale Mabry Hwy. Tampa, FL 33618	8/89	6/90	1 year 10th grade	NO	N-A
	Chamberlain High School 9401 N. Boulevard Tampa, FL 33612	8/90	1/91	1/2 year 11th grade	NO	N-A
	Adult + Community Education Center 4602 N. Seminole Ave. Tampa, FL 33603	9/91	9/91	N/A	yes	G.E.D.

2.	*College/University Name/Address	Dates Attended Mo./Yr.		Credit Hours Earned		Did You Graduate?	Type of Degree
		From	To	Qtr.	Sem.		
	NONE						

*Attach diploma or official transcript from last institution of higher education attended.

Major N-A Minor N-A

3. Other Schools (Trade, Vocational, Business or Military):

Name/Address	Dates Attended Mo./Yr.		Credit Hours Earned	Area of Study	Did You Graduate?	Type of Degree or Certificate
	From	To				
Hillsborough Community College 201 15th St. Tampa, FL 33615	4/93	8/93	10	EM.S.	yes	Emergency Medical Tech.
Erwin VOC - Tech Tampa, FL 2010 E. Hillsborough 33610	4/95	6/95	0	Medical	yes	Medical Terminology
Hillsborough Community College 1404 Tech Blvd. Tampa, FL 33619	4/96	8/96	15	L.E.	yes	Basic Law Enforcement

4. Describe any awards, honors, citations, positions held in school organizations, and any other special recognition you received while attending school:

NONE

5. Indicate any foreign languages you can Speak: very little Spanish

Read: very little Spanish

Write: NONE

6. Indicate any law enforcement education/training:

Basic Law Enforcement Program at Hillsborough Community College
from 4/96 to 8/96. Certifiable Law Enforcement Officer FL by
FOLE 9/96 (state exam). Emergency Vehicle Ops Course by Tampa F.D. 8/93.

7. Did you receive a certificate for this training? ☒ Yes ☐ No Certificate Number: NO Number

8. Describe any special abilities, interests, and hobbies including the degree of proficiency:

I like to target shoot pistols, shotguns and rifles as a
hobby. I am accurate with all but most proficient with
a pistol.

9. Indicate any type of special license such as pilot, radio operator, etc., showing licensing authority, where the license was first issued, and date current license expires (except vehicle operator's license):

Emergency Medical Tech. by FLEMS. expires 12/96, CPR for Health Care
Providers by American Heart Association since NOV 1988 expires 8/88.
Security Officer by FL Div of Licensing expires 1/98, Certifiable LE Officer by FOLE

10. Indicate any special skills you possess and equipment you can use which may be related to law enforcement work. (For example: two-way radio communications, breathalyzer, speed detection equipment, firearms, computers):

two-way radio communications, emergency vehicle operations, report writing,
proficient w/ various types of firearms, dealing w/ the public in emergency and
crisis situations, investigations, medical emergency experience.

11. Have you had any training/education with K-9's? ☐ Yes ☒ No

If yes, provide details: _____

12. Would you be willing to be transferred to a K-9 unit, if necessary? ☒ Yes ☐ No
(I understand that there is a lesser rate of pay for non-duty time devoted to the care and maintenance of the animal.)

EMPLOYMENT HISTORY

1. List chronologically all employment beginning with present employment, including summer and part-time employment while attending school. All time must be accounted for. If unemployed for a period, set forth dates of unemployment.

Name & Address of Employer	Dates Worked Mo./Yr.		Salary	Title or Position	Name of Supervisor	Reason for Leaving
	From	To				
Name: St. Joseph's Hospital Address: 3001 M.L. King Jr. Blvd. City, State, Zip: Tampa, FL 33607 Area Code & Phone No.: 813 - 870-4000 ext. 3303	8/96	to Current	\$17.75 hr.	Security Officer <input checked="" type="checkbox"/> Full <input type="checkbox"/> Part-time	Jim Ward	Current
Name: Shooting Sports (gunrange) Address: 7811 N. Dale Mabry Hwy. City, State, Zip: Tampa, FL 33614 Area Code & Phone No.: 813 - 933-3000	7-95	to 8/96	\$5.00 hr.	Range Officer/ Sales <input checked="" type="checkbox"/> Full <input checked="" type="checkbox"/> Part-time	Gregory Matangone	I needed more money. Offered better job above.
Name: Borg - Warner Security Address: 8019 Himes Ave. Ste 505 City, State, Zip: Tampa, FL 33614 Area Code & Phone No.: 813 - 932-6164	1/96	to 3/96	\$5.00 hr.	Security Guard <input checked="" type="checkbox"/> Full <input type="checkbox"/> Part-time	Lt. Lou Denny	I was paid a lower than agreed salary and I didn't like the job. I went back to f/t at gunrange.
Name: Circle K Address: 5601 S. Florida Ave. City, State, Zip: Floral City, FL 34436 Area Code & Phone No.: 352 - 726-9464	12/95	to 12/95	\$4.50 hr.	Clerk <input type="checkbox"/> Full <input checked="" type="checkbox"/> Part-time	Kathy (manager)	We moved back to Tampa due to lack of sufficient work in the area.
Name: Fantastic Sam's Address: 2609 E. Gulf to Lake Blvd. City, State, Zip: Inverness, FL 34450 Area Code & Phone No.: 352 - 637-7244	11/95	to 12/95	\$4.50 hr.	Receptionist <input type="checkbox"/> Full <input checked="" type="checkbox"/> Part-time	Karlunn (manager)	I was offered more hours at the above job.

2. Have you ever been dismissed or asked to resign or had any disciplinary action taken against you from any employment or position you have held? ☐ Yes ☒ No
3. Have you resigned, or left a job by mutual agreement following allegations of misconduct or unsatisfactory job performance? ☐ Yes ☒ No If yes to question #2 or #3, please provide details.

4. Have you ever applied to or performed paid or unpaid services for a law enforcement agency not listed as an employer? ☒ Yes ☐ No If yes, please provide name of agency and date of application or service.

Polk S.O. 10/96, Hillsborough S.O. 10/96, Tampa P.D. 3/95, ^{BARTOW P.D.} ~~Herrando S.O.~~ 12/96.

5. Do you own a business, or are you a partner or corporate officer in any business or organization not listed previously as a current or former employer? ☐ Yes ☒ No If yes, please provide name and address of business, corporation or organization and describe your relationship or position.

8/24/96 4-3-97
cont. employment history see attached list.

2. Date and type of discharge: _____

3. Are you now or have you ever been a member of a reserve unit or the National Guard? ☐ Yes ☒ No

4. If yes state the branch of service, name and location of your unit and whether you attend drills, meetings, or camps:

5. Was any type of disciplinary action taken against you in the service? ☐ Yes ☒ No If yes, please provide:

Date: _____ Place: _____

6. Have you ever served in the Armed Forces of a foreign country. ☐ Yes ☒ No
If yes, please specify countries and dates.

7. Are you designated as disabled because of any military service? ☐ Yes ☒ No

8. **VETERANS' PREFERENCE:** Check the appropriate block if you are claiming veterans' preference. **Documentation substantiating your claim must be furnished at the time of application.** *N-A*

- ☐ 1. A veteran with a service-connected disability who is eligible for or receiving compensation, disability retirement, or pension under public laws administered by the U.S. Veteran's Administration and the Department of Defense, or
- ☐ 2. The spouse of a veteran who cannot qualify for employment because of a total and permanent disability, or the spouse of a veteran missing in action, captured, or forcibly detained by a foreign power, or
- ☐ 3. A veteran of any war who has served on active duty for 181 consecutive days or more, or who has served 180 consecutive days or more since January 31, 1955 and who was honorably discharged from the Armed Forces of the United States of America if any part of such active duty was performed during a wartime era, excluding active duty for training, or
- ☐ 4. The unmarried widow or widower of a veteran who died of a service-connected disability.

Have you claimed and been employed using veterans' preference since October 1, 1987? ☐ Yes ☒ No

If "yes", please give name of employer: _____

NOTE: Under Florida law, preference in appointment shall be given first to those persons included in 1 and 2 above, and second to those persons included in 3 and 4 above. If an applicant claiming veterans' preference for a vacant position is not selected for the vacant position, he/she may file a complaint with the Division of Veterans' Affairs, P. O. Box 1437, St. Petersburg, Florida 33731.

PERSONAL REFERENCES & ACQUAINTANCES

1. Personal References: Give three (3) references (not relatives, former or present employers, fellow employees, or school teachers) who are responsible adults of reputable standing in their communities, such as property owners, business or professional men or women, who have known you well for the past five (5) years. If retired, give former occupation.

Complete Name <u>Martinez Jr., Mario</u> <small>(Last, First, Middle)</small>		Home Address: City & State: Home Phone:
Yrs. Acq. <u>5</u>	Occupation <u>Detective w/ Hillsborough County Sheriff's Office (Warrants)</u>	Business Address: City & State: Business Phone:

Complete Name <u>Bernt, Andreas</u> <small>(Last, First, Middle)</small>		Home Address: City & State: Home Phone:
Yrs. Acq. <u>5</u>	Occupation <u>Lt. Macdill A.F.B. Fire Dept.</u> <u>Sgt. Hillsborough County S.O.</u>	Business Address: City & State: Business Phone:

Complete Name <u>Brownlee, Traci Dee</u> <small>(Last, First, Middle)</small>		Home Address: City & State: Home Phone:
Yrs. Acq. <u>5</u>	Occupation <u>Medivac Dispatcher for T.C. Hosp.</u> <u>Aeromed.</u> <u>Deputy Hillsborough County S.O.</u>	Business Address: City & State: Business Phone:

2. Social Acquaintances: Give three (3) social acquaintances in your own age group (including both sexes) who have known you well for the past five (5) years.

Complete Name <u>Vazquez, Mark Winston</u> <small>(Last, First, Middle)</small>		Home Address: City & State: Home Phone:
Yrs. Acq. <u>5</u>	Occupation <u>Police Officer</u> <u>Tampa Police Dept</u>	Business Address: City & State: Business Phone:

Complete Name <u>Nelson, Billie Joe</u> <small>(Last, First, Middle)</small>		Home Address: City: Home: Bus:
Yrs. Acq. <u>5</u>	Occupation <u>Police Officer F.T.O.</u> <u>Tampa Police Dept.</u>	City: Business Phone:

Complete Name <u>Sales, Janene Michelle</u> <small>(Last, First, Middle)</small>		Home Address: <u>4710 Emerald Forest Way # 2203</u> City & State: <u>Orlando, FL 32809</u> Home Phone: <u>(407) 648-5565</u>
Yrs. Acq. <u>15</u>	Occupation <u>Waitress at Chili's restaurant</u>	Business Address: <u>7071 International Drive</u> City & State: <u>Orlando, FL 32809</u> Business Phone: <u>(407) 352-7618</u>

ORGANIZATION MEMBERSHIP

1. List all clubs, societies of which you are or have been a member: *NONE*

Name	City & State	Former	Present (list position held & describe activity)
<i>N/A</i>			

2. Are you now or have you ever been a member of any foreign or domestic organization, association, movement, group or combination of persons which has adopted, or shows a policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means? ☐ Yes ☒ No
3. Have you ever made a financial or other material contribution to any organization of the type described in question #2 above? ☐ Yes ☒ No If yes to question #2 or #3, answer questions #4 and #5 also.
4. At the time of your membership, participation, or contribution, did you know of any unlawful aims of the organization? *N/A* ☐ Yes ☒ No
5. Did you intend to promote any unlawful aims of the organization? ☐ Yes ☒ No *N-A*
If yes to question #2, #3, #4, or #5, explain including name of organization and location.

N-A

BUSINESS INTERESTS & LICENSES

1. Do you or have you ever owned any stock or interest in any firm, partnership or corporation dealing wholly or partly in the sale or distribution of alcoholic beverages? ☐ Yes ☒ No
2. Are you now issued or have you ever been issued a license to engage in a business or profession? ☒ Yes ☐ No
3. Was license ever cancelled, suspended or revoked? ☐ Yes ☒ No
If yes to question #1, #2 or #3, please provide details including the type of license or certificate, the agency that issued the license, effective date of license and license number.

#2) E.M.T. by State of FL E.M.S., NOV 1993 #JT0074087.

Security Officer, State of FL Division of Licensing, Jan 1996, # 9600301

Certifiable Law Enforcement Officer, FDLE, Sept 1996 NO #.

CREDIT DATA

1. Do you have any sources of income other than your salary or the salary of your spouse? ☐ Yes ☒ No
Specify each with an estimated annual amount.
-
2. Are you or your spouse indebted to anyone? ☒ Yes ☐ No If yes, please list all debts over \$500. Be sure to include student loans and charge accounts. Also, list any debt where payment is **past due**, regardless of amount.
- | Creditor | Address | Amount | Loan or Account Number |
|----------|---------|--------|------------------------|
| | | | |
| | | | |
| | | | |
3. Have you, your spouse, or a company controlled by you filed for bankruptcy? ☐ Yes ☒ No, or declared bankrupt? ☐ Yes ☒ No, or had a legal judgment rendered against you for a debt? ☐ Yes ☒ No
If yes to any of these questions, please provide details.
-

APPLICANT'S CERTIFICATION

I understand that my appointment or employment will be contingent upon the results of a complete background investigation. I am aware that any omission, falsification, misstatement or misrepresentation will be the basis for my disqualification as an applicant or my dismissal from the Sheriff's Office. I agree to the conditions and certify that all statements made by me on this application are true, correct and complete, to the best of my knowledge. I further fully understand and consent to a polygraph examination concerning the veracity of my responses to the information requested on this application or which is discovered as a result of the background investigation, or any physical examination or drug test. I also understand that I will be fingerprinted. I understand that this employment application shall become the property of the Sheriff's Office and that it and the information received in response to the background examination are public records.

I also understand that I may be required to furnish the Sheriff's Office with a copy of my Income Tax Return for the year preceding this application and for each year during my employment or appointment.

I further understand and agree that my employment or appointment will be contingent upon the results of a complete drug test and that I may be required to take drug tests during the term of my employment or appointment with the Sheriff's Office.

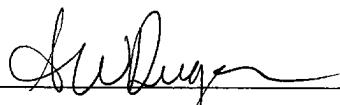
I understand that the use of drugs or alcohol is not permitted, during work or duty time, whether paid or unpaid, in the areas, including vehicles, where work is performed by employees or appointees.

I understand that my continued employment or appointment may be contingent upon the results of medical or psychological examinations that I may be required to take during the term of my employment or appointment and the maintenance of personal physical fitness, to the degree necessary, to satisfactorily perform the duties of my position or assignment with the Sheriff's Office.

I understand and agree that any employment or appointment offered to me will be contingent upon my acceptance of compensatory time off, instead of cash, in payment for overtime hours that I work, to the extent allowed by law. I understand, however, that the Sheriff has the absolute discretion to periodically substitute cash, in whole or part, for my accrued compensatory time.

I authorize any of the persons or organizations referenced in this application to furnish information, personal or otherwise, regarding my ability and fitness for employment or appointment with the Sheriff's Office and I relieve all such parties from any and all liability for any damage that might result from furnishing such information to the Sheriff's Office.

I agree to conform to the rules, regulations and orders of the Sheriff's Office and acknowledge that these rules, regulations and orders may be changed, interpreted, withdrawn or added to by the Sheriff's Office, at its discretion, at any time and without any prior notice to me.



 Signature of the applicant as usually written

1-26-97

 Date

Witnessed by:

Officer David Zane, Tampa Police Department

RESIDENCES

1. Actual places of residence for past 10 years – list chronologically all addresses, including residences while at school and in military. For college on campus residences, give dormitory name, city and state. If residences in military service cannot be shown as street address, indicate complete military unit designation and location by city and state. If post office box, give location of post office.

Dates Mo./Yr.		Apt. No.	Street Address	City	County	State
From	To					

--	--	--	--	--	--	--

ARREST HISTORY/COURT DATA

1. Have you ever been arrested, charged or received a notice or summons to appear for any criminal violation? ☒ Yes ☐ No
2. Have you ever received a ticket or been charged with a traffic violation (exclude parking tickets)? ☒ Yes ☐ No
3. To your knowledge, has any member of your family ever been arrested for other than traffic violations? ☒ Yes ☐ No
If yes to question #1, #2 or #3, list all such matters even if not formally charged, or no court appearance, or found not guilty, or nolo contendere to any charge for which adjudication was withheld, or matter settled by payment of fine or forfeiture of collateral. (Include your juvenile record and records of your arrest(s) which have been sealed, if any.)

	Date	Place & Department	Charge	Court & Place	Disposition
#1	NOV. 1988	Tampa Police Dept.	Peti- (I think) Theft	Hillsborough County	Community Service Juvenile EXPUNGED
#2	NOV. 14th 1994	Tampa Police Dept.	Careless driving	"	Dismissed in court
	Relative's Name	Place & Department	Charge	Court & Place	Disposition
#3		Tampa Police Dept.	Peti Theft	Hillsborough County	Community Service

Provide details for each response to question #1, #2, or #3: #1) This was as a juvenile I was in a store with a girl who was shoplifting (I didn't know), as we were leaving the store she handed me her bag then we were grabbed by Store Security and both charged. #2) I wasn't driving careless + the charge was dismissed. #3) I don't know details that was my mother

4. Have you or your spouse ever been a plaintiff or defendant in a court action? ☒ Yes ☐ No
5. Have you ever been detained by any law enforcement officer for investigative purposes or to your knowledge have you ever been the subject of or a suspect in any criminal investigation? ☒ Yes ☐ No
6. Have you ever been fingerprinted for any reason (arrest, job application, military, etc.)? ☒ Yes ☐ No
If yes to questions #4, #5 or #6, please provide details.

#4) I was the plaintiff in my divorce. #5) for questions #1 and #2. #6) by Tampa Police on 3/20/95, by Hillsborough S.O. on 10/93, 1/96 and 10/96 all for pre-employment screenings; And by Hillsborough S.O. on 2/96 for my concealed weapons permit.

DRIVING HISTORY

1. Are you a licensed Florida automobile operator or chauffeur? ☒ Yes ☐ No License No.: W325-013-73-840-1
Date of Expiration: [REDACTED] Restrictions: NONE
2. Do you hold or have you ever held an operator or chauffeur license in another state? ☐ Yes ☒ No If yes, please provide state(s), name used and approximate dates license(s) was/were held.

3. Have you ever been denied issuance of a license or have you ever had a license suspended or revoked? ☐ Yes ☒ No
If yes, please provide complete details including why license was revoked.

MILITARY HISTORY

1. Have you ever served on active duty in the Armed Forces of the United States? ☐ Yes ☒ No
- Branch of Service: _____ Highest Rank: _____
- Serial #: _____ Duty Dates: From: _____ To: _____ From: _____ To: _____
From: _____ To: _____ From: _____ To: _____

PAST EMPLOYERS

- 1) ST. JOSEPH'S HOSPITAL: 3001 M.L.K. Jr. Blvd.
Tampa, Fl. 33607 (813)870-3303
title- Security Officer
Ops Supervisor- Jim Ward
from 8/96 to \$7.75 hr.
- 2) SHOOTING SPORTS: 7811 N Dale Mabry Hwy.
Tampa, Fl. 33614 (813)933-3000
title- Range Officer/Clerk
V.P.- Gregory Malangone
from 7/95 to 8/96 \$5.00 hr.
*OFFERED MORE MONEY
AT ABOVE JOB #1*
- 3) BORG-WARNER SECURITY: 8019 Himes Avenue Ste. 505
Tampa, Fl. 33614 (813)932-6164
title- Security Officer *818-2000*
Lt.- Lou Denny *DISCONTINUED*
from 1/96 to 3/96 \$5.00 hr.
*I WAS NOT GIVEN THE
WAGES AGREED UPON*
- 4) CIRCLE K: 5601 S Florida Avenue
Floral City, Fl. 34436 (352)726-9464
title- Clerk
manager- Kathy
from 12/95 to 12/95 \$4.50 hr.
I MOVED BACK TO TAMPA
- 5) FANTASTIC SAM'S: 2609 E Gulf to Lake Blvd.
Invernes, Fl. 34450 (352)637-7244
title- receptionist
manager- Karlynn
from 1/10/95 to 12/95 \$4.50 hr.
*I WENT TO JOB #4
FOR MORE HOURS*
- 6) LAB CORP: 5610 LaSalle Road
Tampa, Fl. 33607 (813)289-5227
title- Lab Aid
supervisor- Donna West
from 6/95 to 10/95 \$6.85 hr.
*I WENT FULL TIME AT
JOB #2*
- 7) AM-STAT AMBULANCE
MEDICAL TRANSPORT: 4914 W Knox Street
Tampa, Fl. 33634 (813)885-7722
title- E.M.T. / Body Recoverer
supervisor- David Lineman
from 10/93 to 6/95 \$6.24 hr.
(Am-Stat was bought out
by "Med-Trans" in 10-96)
*I WENT TO THE LAB FOR BETTER
PAY.*
- 8) PIZZA HUT: 2304 E Bearss Avenue
Tampa, Fl. 33613 (813)971-4430
title- Waitress/Hostess
manager- Toni Keller
from 4/93 to 10/93 \$4.75 hr.
I FINISHED EMT SCHOOL

- 7) TARGET: 15420 N Dale Mabry Hwy.
Tampa, Fl. 33618 (813)962-2281
I NEEDED A JOB CLOSER TO HOME, I HAD NO CAR.
title- clerk/stock person
manager- Matt Baird
from 3/93 to 4/93 \$4.50 hr.
- 10) BIKE & SURF CENTER: 1510 [B] Gumbranch Road
Jacksonville, N.C. 28541
I MOVED BACK TO TAMPA
(910)455-1972
title- Clerk
owners- Margaret & Bob Royster
from 1/93 to 2/93 \$5.00 hr.
- 11) I CAN'T BELIEVE IT'S YOGURT: 1510 [A] Gumbranch Road
Jacksonville, N.C. 28541
THE STORE CLOSED FOR THE WINTER
(910)455-1972
title- Manager
ownrs- Roysters
from 5/92 to 12/92 \$5.00 hr.
- 12) WINN DIXIE: 8438 N Armeina Avenue
Tampa, Fl. 33604 (813)931-5918
I MOVED TO N.C. WITH MY HUSBAND WHO WAS IN THE USMC
title- Cashier
manager- Orbe Andux
from 12/91 to 5/92 \$4.75 hr.
- 13) JEWEL OSCO: 15020 N Dale Mabry Hwy.
(store went out of business) Tampa, Fl. 33618 (813) NONE
title- Cashier
manager- Mr. Nash
from 5/91 to 12/92 \$4.50 hr.
- 14) INVENTORIES SPECIALISTS: 5555 W Waters Avenue
Tampa, Fl. 33634 (813)933-2719
THIS WAS A TEMP JOB
title- Data Entry Clerk
manager- Norbert Wein
from 11/90 to 5/91 \$4.75 hr.

PAST EMPLOYERS

- 1) ST. JOSEPH'S HOSPITAL: 3001 M.L.K. Jr. Blvd.
Tampa, Fl. 33607 (813)870-3303
title- Security Officer
Ops Supervisor- Jim Ward
from 8/96 to \$7.75 hr.
- 2) SHOOTING SPORTS: 7811 N Dale Mabry Hwy.
Tampa, Fl. 33614 (813)933-3000
title- Range Officer/Clerk
V.P.- Gregory Malangone
from 7/95 to 8/96 \$5.00 hr.
- 3) BORG-WARNER SECURITY: 8019 Himes Avenue Ste. 505
Tampa, Fl. 33614 (813)932-6164
title- Security Officer
Lt.- Lou Denny
from 1/96 to 3/96 \$5.00 hr.
- 4) CIRCLE K: 5601 S Florida Avenue
Floral City, Fl. 34436 (352)726-9464
title- Clerk
manager- Kathy
from 12/95 to 12/95 \$4.50 hr.
- 5) FANTASTIC SAM'S: 2609 E Gulf to Lake Blvd.
Invernes, Fl. 34450 (352)637-7244
title- receptionist
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- 14) INVENTORIES SPECIALISTS: 5555 W Waters Avenue
Tampa, Fl. 33634 (813)933-2719
title- Data Entry Clerk
manager- Norbert Wein
from 11/90 to 5/91 \$4.75 hr.

CERTIFICATION OF APPLICANT

For Special Process Server Only

I understand that any employment offered to me will be contingent upon the results of a complete character and fitness investigation, and I am aware that wilfully withholding information or making false statements on this application will be the basis for dismissal from the Sheriff's Office. I agree to these conditions and I hereby certify that all statements made by me on this application are true and complete, to the best of my knowledge. I understand that I may be required to submit to the Sheriff's Office a copy of my Income Tax Return for the year prior to employment and may be required to submit a copy of my Income Tax Return each year thereafter while employed by the Sheriff's Office. I also understand and agree that this employment application shall be the property of the Sheriff's Office.

I understand that any employment offered to me will be at the pleasure of the Sheriff who shall retain the power to revoke my appointment at any time that he determines that I am not fully and properly discharging the duties of the office.

I understand that I shall be disinterested in any process I may serve and that any employment offered to me will be contingent upon appointment by the Sheriff whereby I will swear under oath to honestly, diligently, and faithfully exercise the duties of my office.

Signature of the applicant as usually written

Date

We, the undersigned, do hereby swear under oath to personally know _____, to vouch for his or her good moral character and to have witnessed the signature of _____ this _____ day of _____, 19____.

Witnessed by: _____

Witnessed by: _____

DOCUMENTS TO BE ATTACHED TO APPLICATION

1. Attach a certified copy of birth certificate.
2. Attach a certified copy of high school diploma or Florida Police Standards approved G.E.D.
3. Attach a copy of military discharge(s).
4. Attach a certified copy of an executed bond in the amount of \$1,000 with a surety company authorized to do business in Florida.
5. Attach application fee of \$15 (check or money order only).

OTHER REQUIREMENTS

When ordered by the Sheriff's Office, applicant will be fingerprinted and shall submit to a complete physical examination and electrocardiogram, if desired.

REMARKS

PERSONAL INQUIRY WAIVER
Authority for Release of Information

TO: Concerned Person or
Authorized Representative of
Any Organization, Institution
or Repository of Records

APPLICANT'S NAME: April M. Watson-Dugan

DATE OF BIRTH: [REDACTED]

SOCIAL SECURITY NO.:

I respectfully request and authorize you to furnish the Manatee County Sheriff's Office any and all information that you may have concerning my work record, school record, military record, reputation, and financial and credit status. Please include any and all reports including all information of a confidential or privileged nature, and photostats of same, if requested. This information is to be used to assist in determining my qualifications and fitness for the position I am seeking with the Sheriff's Office.

I hereby release you, your organization or others from any liability or damage which may result from furnishing the information requested above.

[Signature]
Applicant's Signature

1-26-97
Date

City

State

Zip Code

AFFIDAVIT

STATE OF FLORIDA

COUNTY OF Hillsborough

Subscribed and sworn to (or affirmed) before me on January 26, 1997 (date) by David Torres

(name of affiant). He/She is personally known to me or has presented Florida Drivers License [REDACTED]
(type of identification) as identification.

(SEAL)

Signature David Torres, Officer Badge 844

Name David Torres,

Title NOTARY PUBLIC Officer Tampa P.D.

Commission No.: _____ Expires: _____

CONFIDENTIAL EMPLOYEE HISTORY

THE INFORMATION CONTAINED HEREIN IS CONFIDENTIAL
AND WILL NOT BE MADE AVAILABLE FOR PUBLIC INSPECTION.

1. Applicant's Current Address:

State Zip Code

Telephone Number

2. Spouse's Name and Address (if different):

Name

Address

City County State Zip Code

3. Children's Names and Ages:

Name	Age	Address (if different)
NONE		

4. Former Spouse(s) Name and Address:

Name

Address

City County State Zip Code

5. Are you now able to participate with or without accommodation in defensive tactics, firearms or physical training, operation of a motor vehicle, or otherwise perform the duties set forth in the job description or task analysis related to the position for which you applied? ☒ Yes ☐ No

6. This position may require a physical agility test, if such a test or examination is required, would you be able to take this test or examination with or without an accommodation? ☒ Yes ☐ No
☐ Yes ☐ No

7. Explain what accommodation(s) you would need to perform these tasks or take the test or examination.

NONE

(CUT & DETACH ALONG THIS DOTTED LINE)

8. Do you now, or have you possessed, supplied, or sold any narcotic or controlled substance such as, but not limited to, marijuana, hashish, cocaine, LSD, amphetamines, heroin, steroid or any drug of a similar nature? ☒ Yes ☐ No
If yes, please complete the following:

a. Drug: marijuana
b. Circumstances: I was a stupid young person this day.
c. Number of times possessed/supplied/sold: 1 (one)
d. First time possessed/supplied/sold: Mid 1988
e. Last time possessed/supplied/sold: Same as first

9. Do you currently use any narcotic or controlled substance, such as those listed in question 9 or have you used such a narcotic or controlled substance within the last year? ☐ Yes ☐ No
10. Please provide name and address of next of kin or other person to be contacted in case of an emergency:

Home Phone

Business Phone

11. Please provide the name and address of your personal or family physician to be contacted in case of an emergency:

Name Dr. David Lubin
Address 2416 Cleveland Street Tampa Florida 33609
City State Zip Code
(813) 253-3164
Business Phone

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D A

TO: All Certified Employees

FROM: Charles B. Wells, Sheriff

DATE: December 17, 1996

SUBJECT: DOMESTIC VIOLENCE

Pursuant to the Omnibus Consolidated Appropriations Act of 1997, any person convicted of a misdemeanor crime of violence, as defined by the Act is prohibited from shipping, transporting, possessing, or receiving firearms or ammunition. There is no 'official use' exemption to this prohibition. Accordingly, the MANATEE County Sheriff's Office is requiring that every officer granted the authority to bear arms by the Sheriff submit the following Affidavit in compliance with the new law.

A conviction shall not apply for the purpose of this new law UNLESS:

- (A) The person was represented by counsel in the case or knowingly and intelligently waived the right to counsel in the case, and;
- (B) If the person was entitled to a trial by jury under the laws of the convicting jurisdiction then the conviction must have resulted from:
 - (1) A trial by jury;
 - (2) The person knowingly and intelligently waived the right to have the case tried by a jury, by guilty plea or otherwise.

APRIL M. WATSON-DUGAN

OBJECTIVE: To continue a successful **Law Enforcement** career utilizing my experience and training.

EDUCATION: **Certificate of Achievement – 1996**
Police Academy, Tampa, Florida
State Certified Law Enforcement Officer
Letter of Recommendation from Harry Lee Coe, State Attorney
Letter of Recommendation from Malcolm Beard, State Senator
Certificate of Achievement – Medical Terminology – 1995
Erwin Vocational School, Tampa, Florida

Emergency Medical Terminology (EMT) Certificate – 1993
Hillsborough Community College, Tampa, Florida
EMT Certificate JT0074087

SUMMARY OF QUALIFICATIONS:

- **Talented independent worker with knowledge of the community and the legal system...Able to excel in establishing rapport and trust across the vast spectrum of personalities.**
- **Excellent communication abilities and interpersonal skills...Able to motivate and interact comfortably with all backgrounds as well as all levels of management.**
- **Ability to identify, solve and follow-up potential and real problems.**
- **Demonstrated skills in counseling and motivating others through example with positive attitude and open communications.**
- **Ability to act as liaison to service provider, community and legal agencies.**

EXPERIENCE:

8/96 to Present

ST. JOSEPH'S HOSPITAL, Tampa, Florida

Security Officer

Responsible for the personnel security and ensures a safe environment throughout the hospital for employees, visitors and patients. Accountable for controlling any emergency or crisis situations that may occur. Assist the Security Manager and the Security Shift Supervisor with all routine investigations.

1995 to 1996

SHOOTING SPORTS GUN RANGE, Tampa, Florida

Range Officer

Responsible for the knowledge and servicing of various types of weapons. Accountable for the supervision and training customers.

1993 to 1995

AMSTAT MEDICAL TRANSPORT, Tampa, Florida

EMT

Performed patient care in emergency situations and provided assistance of body recovery for the County Medical Examiner.

Preferred
Position

MANATEE COUNTY SHERIFF'S OFFICE
Applicant Control Sheet

Date: 4/10/97

TYPING TEST DATE:
WPM:

PERSONAL DATA

SHIFT WORK? Yes
ANY N/C? NO

NAME: APRIL MICHELLE WATSON-DUGAN DOB:
ADDRESS: 3812-58 ST
CITY: TAMPA STATE: FL ZIP: 33619
TELEPHONE: (H) (W) POB: FL
RACE: W SEX: F HGT: 505 WGT: 175 EYES: BLU HAIR: BLN SS#:
EXPERIENCE: Certified: (Y) N FL Cert # Out of State:
SALARY DISCUSSED WITH APPLICANT: DATE 3-10-97 TIME: 8:08 AM (PROCEED) HALT

DR LIC: ✓ S/S CARD: ✓ BIRTH CERT: ✓ H/S DIPL: ✓ TABE: ✓ 8/28/96
DD214: N/A NAME CHG: ✓ L/E CERT: ✓ C/O CERT: N/A STATE EXAM: Y ✓ N

TABE (CERT. POSITIONS ONLY) ADD 10 POINTS IF-SERVICE CONNECTED DISABILITY
12.9 X 2.326 = R -SPOUSE OF DISABLED VETERAN
12.9 X 2.326 = M -UNMARRIED WIDOW(ER) OF A VETERAN
12.9 X 2.326 = L ADD 5 POINTS IF-WITH A CAMPAIGN MEDAL
PLUS N/A = MULTIPLY TOTAL SCORE BY .50 = (1)

L/E-C/O ORAL INTERVIEW BOARD: DATE TIME
BOARD SCORE: MULTIPLY SCORE BY .50 = (2)
TOTAL OF LINES 1+2 =

CONDITIONAL OFFER OF PROB APPTNT: DATE 1st 3-10-97 / 2nd
STATEMENT OF POLICY SIGNED: DATE N/A
DOMESTIC VIOLENCE MEMO SIGNED (C/O-L/E APPLICANT): DATE 3-10-97

SIGNED MEDICAL RELEASE FORM: DATE 3-10-97

NCIC/FCIC: DATE 4/10/97 ACCEPTABLE ✓ NOT ACCEPTABLE COMPUTER: DATE 4/10/97 RED DOT: ✓

FINGERPRINTS: DATE 3-10-97

WONDERLIC PERSONNEL TEST: DATE N/A SCORE

FITNESS ASSESSMENT TEST: DATE 4/21/97 Score SCORE 3.2

BACKGROUND INTERVIEW: DATE 3-11-97 TIME 9:30

POLYGRAPH: DATE 3-13-97 TIME 1 PM

SPECIFIC: DATE TIME

PSYCHOLOGICAL: DATE 3-10-97 TIME 8:30

FIREARMS: DATE 3-19-97 TIME 1 PM (CURRENTLY CERTIFIED ONLY)

FILE REVIEW: PERSONNEL BACKGROUND (MUST BE COMPL. BEFORE EEB OR CIVIL. BD)

EMPLOYMENT ELIG. BOARD: DATE 4/03/97 ACCEPTABLE ✓ NOT ACCEPTABLE

REFERENCE LETTERS: Employer # Mailed 2 Date 4-3-97
Personal # Mailed 2 Date 4-3-97

CIVILIAN INTERVIEW BOARD: DATE TIME:

PHYSICAL: DATE 4/16/97 TIME 830 AM ACCEPTABLE

DRUG SCREEN: DATE 4/16/97 TIME ACCEPTABLE

EYE EXAM: DATE 4/17/97 TIME 240 AM ACCEPTABLE

HEARING EXAM: DATE N/A TIME ACCEPTABLE

September 20 1996

BREWSTER STUDENT SERVICES
CLIENT PROFILE

Page 1

=====

Ms. April Watson Dugan

SS# or ID [REDACTED]

PROGRAM : PROGRAM ADVISOR:

Level A - TABE 6

=====

TABE6 2 Comprehension	:	Raw(37)	Scaled(789)	GE(12.9)	Percentile(96)
TABE6 3 Math Comp	:	Raw(39)	Scaled(821)	GE(12.9)	Percentile(94)
TABE6 5 Lang Mechanics	:	Raw(24)	Scaled(761)	GE(12.9)	Percentile(97)
TABE6 6 Lang Expression	:	Raw(43)	Scaled(835)	GE(12.9)	Percentile(99)

=====

I have read the above report:

Ms. April Watson Dugan

Counselor/Evaluator: _____

[Signature]
JOE PIND

Date: *9/20/96*

Brewster W. Henry Voc-Tech Center
Tampa, Florida
(813)-276-5448

Florida Department of Law Enforcement

Exam Administration Number 96-028 - Exam Date 8/28/96



School: 099941 Hillsborough Community College

APRIL M DUGAN

SSN:

Discipline: LAW

ReTakeNo:

Form: LE ONE

Effective Date: 07311996

<u>Section #</u>	<u>Raw Score</u>	<u>Percent Correct</u>	<u>Status</u>
1	51	85%	Pass
2	54	90%	Pass
3	56	93%	Pass
4	51	85%	Pass
5	54	90%	Pass
Overall Exam Status:			Pass

CRIMINAL JUSTICE STANDARDS AND TRAINING COMMISSION

This report serves as your official grade notification of the results of your

FLORIDA OFFICER CERTIFICATION EXAMINATION

This exam is one of the prerequisites for certification as an officer. Section 943.133, Florida Statutes, provides additional information regarding employment and certification statutory requirements. The results of each section of the Certification Exam are reported above. Please see the last column entitled "Pass/Fail": PASS indicates a passing score was obtained on that section, FAIL indicates failure.

If this was your first time taking the exam and you did not pass all section(s) of the exam, you will be required to retake and pass only the section(s) failed.

OR

If this was your second time taking the exam and you did not pass all required section(s), you will be required to complete the basic training that corresponds to the exam area(s) failed before taking a second retake.

OR

If this was your third time taking the exam and you did not pass all required sections(s), you will be required to re-enter and successfully complete the entire basic training program and satisfy all requirements of the program. You must then apply for and retake the entire exam.

A new application must be submitted twenty-one days prior to your next requested exam date.

Include a copy of this notice with your new application.

Print Date: 9/16/96

LAW ENFORCEMENT REQUIRED COURSES

Section 1	Section 2	Section 3	Section 4	Section 5
CJD - 760 Legal 1	CJD - 763 Interpersonal Skills	CJD - 734 LE Investigations	CJD - 731 LE Patrol	CJD - 704 Defensive Tactics
CJD - 761 Legal 2	CJD - 762 Communications			CJD - 705 Weapons
CJD - 730 Legal 3				CJD - 723 Vehicle Operations
				CJD - 732 LE Traffic
				CJD - 254 Medical First Responder

CORRECTIONS REQUIRED COURSES

Section 1	Section 2	Section 3	Section 4	Section 5
CJD - 770 Legal 1	CJD - 773 Interpersonal Skills 1	CJD - 752 Correctional Operations	CJD - 750 Interpersonal Skills 2	CJD - 704 Defensive Tactics
CJD - 771 Legal 2			CJD - 772 Communications	CJD - 705 Weapons
				CJD - 254 Medical First Responder
				CJD - 741 Emergency Preparedness

CORRECTIONAL PROBATION REQUIRED COURSES

Section 1	Section 2	Section 3	Section 4
CJD - 790 CPO Legal	CJD - 704 Defensive Tactics	CJD - 792 CPO Interpersonal Skills	CJD - 794 CPO Supervision
	CJD - 254 Medical First Responder	CJD - 793 CPO Communication Skills	
	CJD - 795 Firearms		
	CJD - 791 CPO Operations		



MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION FORM



NAME: Culbreath April EFFECTIVE DATE: 10/07/2023
Last First Middle
ID#: 10000486 TEMP./VOLUNTEER ID#:

CHECK APPLICABLE BOX

- ☐ NEW EMPLOYEE ☐ VOLUNTEER
☐ REHIRE ☐ TEMP EMPLOYEE
☐ TRANSFER ☐ DEMOTION
☐ PROMOTION ☐ PCN CHANGE
☐ STEP INCREASE
☐ OTHER

HR / PAYROLL USE ONLY:

CURRENT PCN: 64030071E ☒ OPEN ☐ INACTIVATE
CURRENT PCN: ☐ OPEN ☐ INACTIVATE
PROPOSED PCN: ☐ REMOVE OPEN ☐ ACTIVATE

SEPARATION OF EMPLOYMENT

- ☐ RESIGNATION ☒ RETIRED (AGENCY)
☐ SEPARATION ☒ RETIRED (FRS)
☐ TERMINATION ☐ DECEASED

CURRENT STATUS

CURRENT STATUS

POSITION TITLE: LE Detective REPORTS TO: Sergeant Jason Farrier
BUREAU: Investigative DIVISION: CID COST CENTER: 16351
SECTION: Fraud/Auto/Pawn UNIT/SQUAD: Specialized

BUREAU CHIEF SIGNATURE / HR DIRECTOR

DATE

HOURLY RATE: \$38.51
ANNUAL RATE: \$80242.52

PROPOSED STATUS

PROPOSED STATUS

POSITION TITLE: REPORTS TO:
BUREAU: DIVISION: COST CENTER:
SECTION: UNIT/SQUAD:

BUREAU CHIEF SIGNATURE / HR DIRECTOR

DATE

Is the proposed status a supervisory position? ☐ Yes ☐ No If Yes, list subordinates:

RECEIVED

By Melissa Raburn at 4:12 pm, Sep 21, 2023

HR USE ONLY

PLACED ON PROBATION:

☐ Yes ☒ No ☐ DO NOT EXTEND

FIRST TIME MSO SUPERVISOR:

☐ Yes ☒ No


PAYROLL INFORMATION


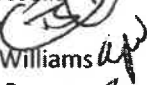



JOB CODE:
PAY GRADE:
STEP:
PAY CLASS:

HOURLY RATE:
ANNUAL RATE:
SCHEDULED HRS:

RETIREMENT:
AA CODE:

MANATEE COUNTY SHERIFF'S OFFICE
MEMORANDA

TO: Sheriff Rick Wells 

THROUGH: Colonel Patrick Cassella 
Major Todd Shea 
Captain Anthony Williams 
Lieutenant Aaron Bowen 
Sergeant Jason Farrier 

FROM: Detective April Allison Culbreath *AC*

SUBJECT: Letter of Resignation

DATE: September 20, 2023

Dear Sheriff Wells and Team MSO,

I am writing this letter to formally announce my resignation from my position as Detective at the Manatee County Sheriff's Office. After careful consideration and prayer, I have decided that it is time for me to explore new opportunities and challenges in my public service journey. My last day of employment will be October 7th, 2023, which allows for more than a two-week notice as per the standard practice.

I have spent the past 26+ years working diligently within almost every unit for the Sheriff's Office and the citizens of Manatee County. I am incredibly grateful for the experiences, relationships, and skills I have gained during my time here. The support of my colleagues and the shared commitment to upholding the law and ensuring the safety of our community have been deeply meaningful to me.

I want to express my sincere gratitude to the entire Sheriff's Office family for their collaboration, guidance, and camaraderie throughout my career. It is with mixed emotions that I embark on this new chapter, but I am excited about the good works, policy and projects that lie ahead.

I am committed to ensuring a smooth transition during my departure. I've been working with my first line supervisor, transferring my responsibilities and any ongoing investigations to my amazing young colleagues. I am more than willing to provide any necessary training or documentation to ensure a seamless handover. I already look forward to volunteering with the FAP Unit, as discussed, in the future.

Although I gave verbal notice in August, please consider this letter as my formal resignation in accordance with the notice period mentioned above.

Thank you again for the wonderful years I have spent at the Manatee County Sheriff's Office. I am extremely proud of the work we have accomplished together. Rest assured I will carry the experiences and camaraderie with me as I move forward in my public service career. I sincerely hope all of you feel free to reach out to me personally if there is any issue I may be of assistance with as things progress.

In His service,

Detective April Allison Culbreath #10000486

MANATEE COUNTY SHERIFF'S OFFICE
ALLEGATION OF EMPLOYEE MISCONDUCT

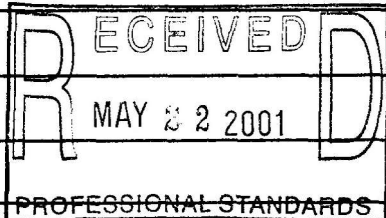
AC 2001-091 "0"

COMPLAINANT	NAME <u>SGT. M. STANLEY</u>	DATE OF BIRTH _____
	ADDRESS <u>MCSO</u>	
	HOME PHONE () _____	OFFICE PHONE () _____
EMPLOYEE	NAME <u>APRIL DUGAN</u>	ASSIGNMENT <u>SEU/PAT</u>
	SEX <u>W</u>	RACE <u>F</u>
	BADGE/ID/CAR NUMBER _____	
	OTHER DESCRIPTION _____	

Details of the incident. (Use additional sheets, if necessary.)

RECEIVED. A COMPLAINT THAT DEP. DUGAN
IS DRIVING HER MARKED MCSO VEHICLE OUT
OF COUNTY TO HER RESIDENCE WITHOUT
PERMISSION.

JD



I have read and understand this complaint and find it true and correct. It is my desire that this complaint be diligently investigated. I further understand that if the investigation proves these allegations to be false, I may be liable to both civil and criminal prosecution.

5-11-01
DATE

[Signature]
SIGNATURE OF COMPLAINANT (Parent or guardian signature if a minor.)

SGT. MARTIN STANLEY
PRINTED NAME OF RECEIVING EMPLOYEE

[Signature]
SIGNATURE OF RECEIVING EMPLOYEE

DISTRIBUTION

COPY TO THE AFFECTED COMMISSIONER/ADMINISTRATOR
ORIGINAL TO PROFESSIONAL STANDARDS

COPY TO THE COMPLAINANT
COPY TO THE SHERIFF/CHIEF DEPUTY



MANATEE COUNTY SHERIFF'S OFFICE
ALLEGATION OF EMPLOYEE MISCONDUCT

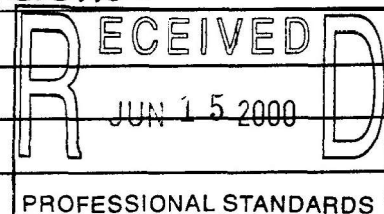


COMPLAINANT	NAME <u>KEITH S. LEUGH</u>	DATE OF BIRTH _____
	ADDRESS <u>OFFICE OF PROFESSIONAL STANDARDS</u>	
	HOME PHONE _____	OFFICE PHONE <u>X2965</u>
EMPLOYEE	NAME <u>APRIL WATSON</u>	ASSIGNMENT <u>PATROL</u>
	SEX <u>F</u>	RACE <u>W</u> BADGE/ID/CAR NUMBER _____
	OTHER DESCRIPTION _____	

Details of the incident. (Use additional sheets, if necessary)

DEPUTY WATSON VIOLATED SECTION 2.11.3.12, G.O. 1013, TO WIT:
FAILING TO COLLECT AND PRESERVE EVIDENCE OF A CRIMINAL ACT. ON
OCTOBER 2, 1998 DEPUTY WATSON SIGNED OUT AT THE SARASOTA MOTOR
INN AND SUBSEQUENTLY CONTACTED THREE PROSTITUTES. DURING THIS
CONTACT DEPUTY WATSON TOOK TWO STEMS, COMMONLY USED TO SMOKE
COCAINE, FROM AT LEAST ONE OF THE PROSTITUTES. SHE THEN
DROPPED THE STEMS AND CRUSHED THEM WITH HEEL SHOE. NO
PHYSICAL ARREST WAS MADE FOR THAT AND NO REPORT WAS WRITTEN.
THIS VIOLATION BECAME KNOWN DURING IAS 2000-10013. DEPUTY
WATSON WAS NOT THE SUBJECT OF THAT OTHER INVESTIGATION.

ATTACHED ARE PORTIONS OF THREE TRANSCRIPTS WHERE MENTION IS
MADE OF THE STEMS, THEIR POSSESSION, AND DESTRUCTION.



I have read and understand this complaint and find it true and correct. It is my desire that this complaint be diligently investigated. I further understand that if the investigation proves these allegations to be false, I may be liable to both civil and criminal prosecution.

6-15-00

Date

Signature Of Complainant (Parent Or Guardian signature if complaint is a minor)

Printed Name Of Receiving Employee

Signature Of Receiving Employee

DISTRIBUTION

COPY TO THE AFFECTED BUREAU CHIEF
ORIGINAL TO PROFESSIONAL STANDARDS

COPY TO THE COMPLAINT
COPY TO THE SHERIFF/ CHIEF DEPUTY

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D A

TO: Detective April Watson-Dugan
Investigative Bureau

FROM: Chief Inspector Ed Judy 
Professional Standards

DATE: November 22, 2002

SUBJECT: Letter of Reprimand - DA#897
AC#2000-099 "N"

On July 26, 2000, a Letter of Reprimand was issued reflecting the violation of General Order 1013, 2.11.3.12, under Neglect of Duty. This Letter of Reprimand is rescinded.

On October 25, 2002, you signed a Waiver of Hearing to Show Cause accepting my recommendation of the proposed disciplinary action.

Therefore, you are to consider this as a Letter of Reprimand for your actions regarding a violation of General Order 1013, paragraph 2.11.3 under Neglect of Duty.

Be advised any future violations of a like offense will prompt stronger disciplinary action.

A copy of this reprimand will be made a permanent part of your personnel file.

ERJ/bs

cc: Major Shingledecker
Captain Kenney
Lieutenant Couch
Personnel
Professional Standards

**MANATEE COUNTY SHERIFF'S OFFICE
WAIVER AND RELEASE**

STATE OF FLORIDA

October 25, 2002

COUNTY OF MANATEE


I, **Deputy April Watson**, being fully aware of my rights, do hereby state as follows:

1. That I have been accused of violating Manatee County Sheriff's Office Policies and Procedures, to wit: G.O. 1013, paragraph 2.11.3 under Neglect of Duty and was so notified by memoranda October 25, 2002.
2. That the proposed disciplinary action for the above violation is:


Letter of Reprimand

3. That I am aware that I have the right to attend a show-cause hearing and present reasons why the proposed discipline should not be imposed.
4. That I am aware that I have the further right to appeal any decision reached at the show-cause hearing, either to the Sheriff or the Sheriff's Career Service Appeal Board, depending on the discipline imposed.
5. Being fully apprised of and aware of the appeal rights mentioned above, and being fully informed thereon, I hereby knowingly and voluntarily accept the proposed disciplinary action in Paragraph 2, above, and further knowingly and voluntarily waive any right to attend the show-cause hearing and my right to appeal to the Sheriff or Career Service Appeal Board.

By my signature below, I hereby acknowledge that I have read and understand this Waiver. I further acknowledge that I have the right to consult with an attorney or other individual of my choosing prior to signing this Waiver and state that I either have so consulted or hereby knowingly decline to do so.



Employee Signature



Witness Signature

Date: 11/2/02

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDA

TO: Deputy April Watson
Enforcement Bureau/D3

FROM: Major Steube *WBS*
Enforcement Bureau Chief

DATE: July 26, 2000

SUBJECT: Letter of Reprimand - DA#897
AC#2000-099 "N"

*11/09/02
After review this
letter is RESCINDED
Based on A Hearing
To show Cause. SEE
attached memorandum
by Chief Inspector Juby
10/25/02
ERJ*

On July 20, 2000, you signed a Waiver of Hearing to Show Cause accepting my recommendation of the proposed disciplinary action.

Therefore, you are to consider this as a Letter of Reprimand for your actions regarding a violation of General Order 1013, paragraph 2.11.3.12 under Neglect of Duty.

Be advised any future violations of a like offense will prompt stronger disciplinary action.

A copy of this reprimand will be made a permanent part of your personnel file.

WBS/bs

cc: Captain Hagaman
Lieutenant Sixbey
Personnel
Professional Standards

FILE COPY

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Deputy April Watson
Enforcement Bureau/D3

THRU: Major Steube
Enforcement Bureau Chief

FROM: Captain Hagaman *THH/B EME JCH (7.20.00)*
Enforcement Bureau/D3

DATE: July 19, 2000

SUBJECT: Proposed Disciplinary Action - DA#897
AC #2000-099 "N"

*11/09/02
After Review this finding
is changed to reflect a
NOT-SUSTAINED finding.
See attached memo dated
10/25/02 by Chief Inspector
Juby.*

Allegations of Neglect of Duty by violation of General Order 1013, 2.11.3.12, have been sustained against you. For details of these allegations, refer to the Allegation of Employee Misconduct Form attached hereto.

It is proposed that the following disciplinary action take place; that you receive a Letter of Reprimand. This action, if taken, will be made a permanent part of your personnel file.

I have scheduled an appointment for you on, July 27, 2000, at 11:00 A.M. in the Professional Standards office (Room 13) at the Stockade at 14490 Harlee Road, Palmetto, Florida (Pat Glass Blvd. - First Building on left). At that time you will be afforded the opportunity to show cause why the proposed disciplinary action should not take place.

If you elect to do so, you may bring your attorney(s) or any witnesses you desire to testify on your behalf.

If you are in agreement with the proposed disciplinary action, please sign and return the attached waiver to Professional Standards at the Stockade.

JH/bs
Attachment

MANATEE COUNTY SHERIFF'S OFFICE
WAIVER AND RELEASE

STATE OF FLORIDA

July 19, 2000

Date

COUNTY OF MANATEE

Rescinded
11/09/02

I, Deputy April Watson, being fully aware of my rights, do hereby state as follows:

1. That I have been accused of violating Manatee County Sheriff's Office Policies and Procedures, to wit: **General Order 1013, paragraph 2.11.3.12 Neglect of Duty** and was so notified by memorandum dated July 19, 2000.

2. That the proposed disciplinary action for the above violation is:

Letter of Reprimand

3. That I am aware that I have the right to attend a show cause hearing and present reasons why the proposed discipline should not be imposed.

4. That I am aware that I have the further right to appeal any decision reached at the show-cause hearing, either to the Sheriff or the Sheriff's Career Service Appeal Board, depending on the discipline imposed.

5. Being fully apprised of and aware of the appeal rights mentioned above, and being fully informed thereon, I hereby knowingly and voluntarily accept the proposed disciplinary action in Paragraph 2, above, and further knowingly and voluntarily waive any right to attend the show-cause hearing and my right to appeal to the Sheriff or Career Service Appeal Board.

By my signature below, I hereby acknowledge that I have read and understand this Waiver. I further acknowledge that I have the right to consult with an attorney or other individual of my choosing prior to signing this Waiver and state that I either have so consulted or hereby knowingly decline to do so.

YMS MB
Witness Signature

[Signature]
Signature of Deputy

07.20.00
Date:

ORIGINAL

MANATEE COUNTY SHERIFF'S OFFICE
Administrative Compliant # AC-2000-099-N

TO: **Chief Inspector Ed Judy**
Professional Standards

THRU: **Major W. B. Steube** *WBS 07/14/00*
Captain M. B. Mayer *MBM*

FROM: **Lieutenant J. T. Sixbey** *JTS.*

DATE: **July 12, 2000**

Allegation: **Neglect of Duty**

Complainant alleges Deputy failed to collect and preserve evidence in violation of G.O. 1.013, Section 2.11.3.12.

Complainant: Sergeant Keith Keough

Alleged Deputies: Deputy April Watson

Date of Incident: October 02, 1998

Date Reported: June 15, 2000

Date issued to Lt. Sixbey: June 21, 2000

Date of Finding: July 12, 2000

Findings: SUSTAINED

*11/09/02
After review this finding
is changed to reflect a
NOT-SUSTAINED. See attached
memo dated 10/25/02 by
Chief Inspector Judy.*

The following taped interview was conducted:

Deputy April Watson, July 07, 2000

Friday, July 07, 2000 at 1545 hours:

On the above date and time I met with Deputy April Watson at the District Two Sub-Station where I conducted a taped interview. Deputy Watson was sworn prior to the interview. Deputy Watson was given the opportunity to read the Allegation of Misconduct and was asked to read and sign an Admonition form, which she did. Deputy Watson advised she understood the Admonition form and allegations of misconduct. A copy of the appropriate paper work and the tape are enclosed with this case file. The tape has not been transcribed.

Deputy Watson stated she could not remember for sure but believed she probably did drop the stems to the ground and stepped on them crushing them. She stated she did not make a physical arrest, nor did she complete an incident report. Deputy Watson advised she should have, at the very least, collected the stems as evidence, placed them in the Property and Evidence Section, and completed an Incident report. She is well aware she is not authorized to destroy the stems in the manner in which she did.

CONCLUSION:

Deputy Watson admitted she was neglectful in her duties when she failed to collect and preserve evidence in accordance with established policies and procedures.

The investigative findings for these allegations are as follows:

SUSTAINED FINDING – Sufficient evidence exists to support the allegations in this complaint.

It is recommended that Deputy Watson receive disciplinary action in the form of a Letter of Reprimand for her failure to collect and preserve evidence in accordance with established policies and procedures. These recommendations are made with the understanding that Professional Standards will review this recommendation to ensure consistency in like and similar findings.

JTS/jts

MEMORANDUM

TO: ADMINISTRATIVE COMPLAINT FILE AC-2000-099-N

FROM: CHIEF INSPECTOR ED JUDY *ERJ 11/09/02*

DATE: October 25, 2002

SUBJECT: CHANGE OF FINDING TO INVESTIGATION

A review of AC-2000-099-N reveals it incorrectly reflects the wrong General Order violation sustained against Deputy Watson. The incorrect noted violation, failing to ¹² collect and preserve evidence under the Neglect of Duty General Order 1013,2.11.3. ~~16~~, was not sustained by Colonel Pearson at the Hearing to Show Cause of Deputy Dickerman. At this hearing it was established that the item found by Deputy Watson had never been utilized for any illegal act nor did it display any signs of residue. Based on this information the Colonel found that the item was not evidence or contraband and that it did not have to be submitted to Property and Evidence. However since Deputy Watson failed to write a supplement report a SUSTAINED finding was entered under the Neglect of Duty General Order 1013,2.11.3 which states in part: "Failing to perform duties for which an employee is compensated..." The same recommendation for discipline: Letter of Reprimand.

This error of incorrectly reflecting the wrong General Order violation was not discovered until recently and all paperwork will be changed to reflect a NOT SUSTAINED finding to Count One for the evidence issue; and a SUSTAINED finding for Count Two reference the supplement report. Additionally, a new "Waiver and Release" will be submitted to Deputy Watson.

No other action at this time. All records will be changed to reflect this correction.

Manatee County Sheriff's Office
Memorandum

To: Chief Inspector Ed Judy
Professional Standards

Thru: Major Brad Steube *WBS 05/21/01*
Enforcement Bureau Chief

Captain John Hagaman *[Signature]*
Patrol Commander District Three

From: Lieutenant William G. Dixon *[Signature]*
Selective Enforcement Section

Date: May 11, 2001

Subject: Allegation #1 : Insubordination
G.O. 1013 section 2.11.2.4 Refusal to obey a proper order from a supervisor

Allegation #2 : Insubordination
G.O. 1013 section 2.11.2.1 failure to be familiar with or adhere to general orders
regarding G.O. ~~2005~~ 2.7, 2.7.1 unauthorized use of MCSO vehicles
3020

Complainant: Sergeant Martin Stanley

Alleged Deputy: April Dugan

Deputy April Dugan lives in Hillsborough County. In January 2001, she requested permission through the chain of command to drive her marked MCSO vehicle home when commuting to and from work. On January 25, 2001, she received a memorandum from Major Steube denying her request regarding her take home vehicle. After being assigned to the Selective Enforcement Unit (a temporary position under the supervision of Sgt. M. Stanley) Sgt. Stanley received information that Deputy Dugan was taking her vehicle home. On 5-11-01 when Deputy Dugan was off duty, Sgt. Stanley checked the Parrish Fire Station and noticed Deputy Dugan's personal vehicle was parked in the lot where her marked vehicle is supposed to be parked. Upon checking her residence, her marked MSO vehicle was parked in her driveway. At 1120 hours, Sgt. Stanley and Lt. Dixon arrived at Deputy Dugan's residence and after knocking on the door spoke to Deputy Dugan outside of her residence. She was instructed to drive her MSO vehicle back into Manatee County and park the vehicle where it belongs. Deputy Dugan asked "How much trouble am I in?". She was told that it has yet to be determined. She gave no excuse for having her vehicle out of county.

On May 14, 2001 at 1358 hours I met with Deputy April Dugan in my office. I provided the Garrity form to her and had her read and sign it. I informed Deputy Dugan that this interview would be recorded and of the facts in which the interview is related. I questioned Dugan in reference to the taking of her marked MCSO vehicle home out of county.

Dugan stated that she did not obtain permission prior to taking her patrol vehicle out of county to her home last Thursday night. Dugan stated that she got off of work late that night and took her car home knowing she wasn't supposed to. Dugan stated she was going on the ship the next day, drive it up to the Port where they were going to meet everyone, and leave it at the jail where she used to park it. Dugan also stated that she was going to rinse the bugs off the car also. Dugan stated she would then drive it back to the fire station where she usually parks it the next day in the morning. I asked Dugan about a letter sent to her by Major Steube dated January 25, 2001 addressing her request to take her car home, which was denied. Dugan stated she did receive the letter. Dugan stated that she has taken her car home with permission from her road supervisor once a month to clean it. Dugan stated that she did not obtain permission to take the car home this time.

Findings

Based on the information received I find that the allegations are **SUSTAINED**. It is my recommendation that Deputy April Dugan receive a punishment with like or similar decisions in this style of case.

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D A

TO: Deputy April Watson-Dugan
Enforcement Bureau/SEU

FROM: Major Steube *WBS*
Enforcement Bureau Chief

DATE: August 24, 2001

SUBJECT: Letter of Reprimand - DA#1053
AC#2001-116 "Q"

On August 22, 2001, you signed a Waiver of Hearing to Show Cause accepting my recommendation of the proposed disciplinary action.

Therefore, you are to consider this as a Letter of Reprimand for your actions regarding a violation of General Order 1013, paragraph 2.11.3.2 under Neglect of Duty.

Be advised any future violations of a like offense will prompt stronger disciplinary action.

A copy of this reprimand will be made a permanent part of your personnel file.

WBS/bs

cc: Captain Hagaman
Lieutenant Sixbey
Personnel
Professional Standards

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D U M

TO: Deputy April Watson-Dugan
Enforcement Bureau/SEU

FROM: Major Steube *WBS*
Enforcement Bureau Chief

DATE: August 17, 2001

SUBJECT: Proposed Disciplinary Action - DA#1053
AC #2001-116 "Q"

Allegations of Neglect of Duty by violation of General Order 1013, 2.11.3.2, have been sustained against you. For details of these allegations, refer to the Allegation of Employee Misconduct Form attached hereto.

It is proposed that the following disciplinary action take place; that you receive a Letter of Reprimand. This action, if taken, will be made a permanent part of your personnel file.

I have scheduled an appointment for you on, August 29, 2001, at 9:00 A.M. in the Professional Standards office (Room 13) at the Stockade at 14490 Harlee Road, Palmetto, Florida (Pat Glass Blvd. - First Building on left). At that time you will be afforded the opportunity to show cause why the proposed disciplinary action should not take place.

If you elect to do so, you may bring your attorney(s) or any witnesses you desire to testify on your behalf.

If you are in agreement with the proposed disciplinary action, please sign and return the attached waiver to Professional Standards at the Stockade.

**WBS/bs
Attachment**

**MANATEE COUNTY SHERIFF'S OFFICE
WAIVER AND RELEASE**

STATE OF FLORIDA

August 17, 2001

Date

COUNTY OF MANATEE

I, Deputy April Watson-Dugan, being fully aware of my rights, do hereby state as follows:

1. That I have been accused of violating Manatee County Sheriff's Office Policies and Procedures, to wit: **General Order 1013, paragraph 2.11.3.2, Neglect of Duty** and was so notified by memorandum dated August 17, 2001.


2. That the proposed disciplinary action for the above violation is:

Letter of Reprimand

3. That I am aware that I have the right to attend a show cause hearing and present reasons why the proposed discipline should not be imposed.
4. That I am aware that I have the further right to appeal any decision reached at the show-cause hearing, either to the Sheriff or the Sheriff's Career Service Appeal Board, depending on the discipline imposed.
5. Being fully apprised of and aware of the appeal rights mentioned above, and being fully informed thereon, I hereby knowingly and voluntarily accept the proposed disciplinary action in Paragraph 2, above, and further knowingly and voluntarily waive any right to attend the show-cause hearing and my right to appeal to the Sheriff or Career Service Appeal Board.

By my signature below, I hereby acknowledge that I have read and understand this Waiver. I further acknowledge that I have the right to consult with an attorney or other individual of my choosing prior to signing this Waiver and state that I either have so consulted or hereby knowingly decline to do so.


Witness Signature


Signature of Deputy

8.22-01
Date:

ORIGINAL

MANATEE COUNTY SHERIFF'S OFFICE
Administrative Compliant # AC-2001-116-QN

TO: Chief Inspector Ed Judy
Professional Standards

CDM 08/09/01

THRU:

Major W. B. Steube
Captain Mike Mayer

WBS 08/08/01

MSM 08-07-01

FROM:

Lieutenant J. T. Sixbey

JTS.

DATE:

XXXXX, 2001

Allegation:

Conduct Unbecoming a Deputy
Neglect of Duty

Complainant alleges Deputy physically grabbed the ticket book from his hands stating she would explain the tickets to him after he signed them and advised him not to drive his truck with a headlight being out in violation of G.O. 1.013, Sections 2.11.1. and 2.11.3.2

Complainant:

John T. Lowery
2141 3rd Street East
Bradenton, Florida Home # 744-5024

Alleged Deputy:

April Dugan

Date of Incident:

June 28, 2001 at 2100 hours

Date Reported:

July 03, 2001

Date issued to Lt. Sixbey:

July 13, 2001

Date of Finding:

XXXXX, 2001

Findings:

SUSTAINED-IN-PART

The following taped interview was conducted:

Deputy April Dugan, July 26, 2001

Thursday, July 26, 2001 at 1415 hours:

On the above date and time I met with Deputy April Dugan at the District Two Sub-Station where I conducted a taped interview. Deputy Dugan was sworn prior to the interview. Deputy Dugan was given the opportunity to read the allegation of misconduct and was asked to read and sign an Admonition form and Section 112.533(4) of Florida State Statutes, which she did. Deputy Dugan advised she understood the Admonition form, allegations of misconduct, and Section 112.533(4) of Florida State Statutes. A copy of the appropriate paper work and the tape are enclosed with this case file. The tape has not been transcribed.

Deputy Dugan stated she advised Mr. Lowery that one of his headlights was out when she initially approached him. His response was, **"What are you going to do take me to jail for a light being out"**. Deputy Dugan stated Mr. Lowery became negative and difficult to deal with. Further investigation revealed that Mr. Lowery also had a tag light out. Deputy Dugan stated Mr. Lowery admitted he knew his headlight and tag lights were out.

Deputy Dugan stated that usually she does not issue citations for violations such as a headlight and tag light being out. She stated the remark made by Mr. Lowery and his negative attitude was a deciding factor which caused her to issue citations instead of correction cards. Deputy Dugan admitted she advised Mr. Lowery and wrote in her court information slip, ***"I told Lowery he needed to park his truck until he got the light fixed"***.

Deputy Dugan denied grabbing her ticket book from Mr. Lowery's hand. She stated Mr. Lowery was advised she would explain his different options after he signed the two tickets.

Deputy Dugan was advised that she is not authorized by Florida Traffic Law to order a motorist during the hours of darkness to park their vehicle, until such time as the headlight can be repaired.

Deputy Dugan stated she was instructed by her FTO, Deputy Christine Thomason, that this is acceptable procedure. Deputy Dugan was again advised that procedure is not proper nor was it legal and she was cautioned not to repeat it in the future.

Thursday, August 02, 2001 at 1445 hours:

Lieutenant Sixbey questioned Deputy Christine Thomason by phone. The conversation was not recorded.

Deputy Thomason confirmed that she was assigned as a Field Training Officer for Deputy Dugan. Deputy Thomason denied instructing Deputy Dugan to advise motorists to park their vehicle until such time as that the headlight can be repaired when they are driving during the hours of darkness.

CONCLUSION:

This investigation was unable to precisely determine exactly what occurred as it relates to whether Deputy Dugan did grab the ticket book from the hands of Mr. Lowery.

This investigation concluded that Deputy Dugan did in fact advise Mr. Lowery he was to park his truck until such time he was able to repair the one headlight and Deputy Dugan was not authorized by law to issue such an order. Therefore, a Sustained-In-Part finding is established that Deputy Dugan failed to be familiar with and adhere to Florida State Statutes.

According to the General Orders a violation of this nature is subject to a reprimand to 5 days suspension.

The investigative findings for these allegations are as follows:

SUSTAINED-IN-PART FINDING - If one or more, but not all, allegations made against an employee are found to be true, then a **SUSTAINED-IN-PART** finding would apply.

It is recommended that Deputy Dugan receive disciplinary action in the form of a Letter of Reprimand for her failure to be familiar with and adhere to Florida State Statutes. This recommendation is made with the understanding that Professional Standards will review this recommendation to ensure consistency in like and similar findings.

JTS/jts



MANATEE COUNTY SHERIFF'S OFFICE
ALLEGATION OF EMPLOYEE MISCONDUCT



AC 0004-042

COMPLAINANT

NAME Captain William Dixon DATE OF BIRTH _____

ADDRESS MCSO

HOME PHONE _____ OFFICE PHONE 2520

EMPLOYEE

NAME Detective April Dugan ASSIGNMENT CAC

SEX W RACE F BADGE/ID/CAR NUMBER 10000486

OTHER DESCRIPTION Mounted Patrol Deputy

Details of the incident. (Use additional sheets, if necessary)

On Sunday, April 11, 2004 at approximately 1515 hours, Detective Dugan's horse had broken loose from the MCSO Mounted Patrol horse trailer parked on the East side of Gulf Drive (Bradenton Beach) in the Command Post area and ran away. Detective Dugan and other deputies present gave chase on foot. During this time Deputy Carol Magnusson walked over to her patrol car and found a handgun laying in the sand next to her car. Believing that the gun belonged a deputy working the detail, Deputy Magnusson secured it in the trunk of her patrol car and notified Lt. Sanchez (CERT Commander). After the horse was caught and taken back to the horse trailer, I was notified by Lt. Sanchez that Detective Dugan had lost her handgun and it had been returned to her. I then spoke to Detective Dugan about this issue and she stated that she did not know it had fallen out of her holster and did not know how it had happened. I asked Dugan if her holster had been snapped and she stated yes. I asked if both snaps had been fastened and she stated that she does not snap the second lower snap on the holster. I then took hold of her handgun by the grip and attempted to remove or pull it out of the holster with only the top snap fastened and was unable. I inquired no further into this incident due to the need for Detective Dugan to care for her horse. It should be noted that the Command Post was next to a covered picnic area which was occupied by numerous adults and children.

I have read and understand this complaint and find it true and correct. It is my desire that this complaint be diligently investigated. I further understand that if the investigation proves these allegations to be false, I may be liable to both civil and criminal prosecution.

4-12-04

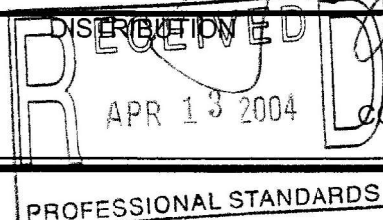
Date

Signature Of Complainant (Parent Or Guardian signature if complaint is a minor)

Printed Name Of Receiving Employee

Signature Of Receiving Employee

COPY TO THE AFFECTED BUREAU CHIEF
ORIGINAL TO PROFESSIONAL STANDARDS




COPY TO THE COMPLAINANT
COPY TO THE SHERIFF/ CHIEF DEPUTY

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D U M

TO: Detective April Dugan
Investigative Bureau/Crimes Against Children

FROM: Major C.K. Shingledecker 
Investigative Bureau Chief

DATE: June 25, 2004

SUBJECT: Letter of Reprimand

On June 17, 2004, you were afforded the opportunity to Show Cause why the proposed disciplinary action of Letter of Reprimand should not take place regarding a sustained violation of General Order 1013, 2.11.3, Neglect of Duty.

Upon review of the evidence and testimony presented in this hearing, I have reached the following decision. I have elected to impose the proposed disciplinary action of a Letter of Reprimand.

Therefore, you are to consider this a Letter of Reprimand for you actions.

Be advised any future violations of a like offense will prompt stronger disciplinary action.


A copy of this reprimand will be made a permanent part of your personnel file.

Cc: Captain Ministral
Lieutenant Dummer
Personnel
Professional Standards

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D U M

TO: Detective April Dugan
Investigative Bureau/Crimes Against Children

FROM: Major C. Shingledecker 
Investigative Bureau Chief

DATE: June 1, 2004

SUBJECT: Proposed Disciplinary Action – DA #1460
AC #2004-042

Allegations of Neglect of Duty by violation of General Order 1013, 2.11.3, have been sustained against you. For details of these allegations, refer to the Allegation of Employee Misconduct Form attached hereto.

It is proposed that the following disciplinary action take place; that you receive a Letter of Reprimand. This action, if taken, will be made a permanent part of your personnel file.

I have scheduled an appointment for you on June 17, 2004, at 10:00 A.M. in the Professional Standards office (Room 13) at the Stockade at 14490 Harlee Road, Palmetto, Florida (Pat Glass Blvd. - First Building on left). At that time you will be afforded the opportunity to show cause why the proposed disciplinary action should not take place.

If you elect to do so, you may bring your attorney(s) or any witnesses you desire to testify on your behalf.

If you are in agreement with the proposed disciplinary action, please sign and return the attached waiver to Professional Standards at the Stockade.

**CKS /bs
Attachment**

**MANATEE COUNTY SHERIFF'S OFFICE
WAIVER AND RELEASE**

STATE OF FLORIDA

June 1, 2004
Date

COUNTY OF MANATEE

I, **Detective April Dugan**, being fully aware of my rights, do hereby state as follows:

1. That I have been accused of violating Manatee County Sheriff's Office Policies and Procedures, to wit: **General Order 1013, paragraph 2.11.3, Neglect of Duty** and was so notified by memorandum dated June 1, 2004.

2. That the proposed disciplinary action for the above violation is:

Letter of Reprimand

3. That I am aware that I have the right to attend a show cause hearing and present reasons why the proposed discipline should not be imposed.

4. That I am aware that I have the further right to appeal any decision reached at the show-cause hearing, either to the Sheriff or the Sheriff's Career Service Appeal Board, depending on the discipline imposed.

5. Being fully apprised of and aware of the appeal rights mentioned above, and being fully informed thereon, I hereby knowingly and voluntarily accept the proposed disciplinary action in Paragraph 2, above, and further knowingly and voluntarily waive any right to attend the show-cause hearing and my right to appeal to the Sheriff or Career Service Appeal Board.

By my signature below, I hereby acknowledge that I have read and understand this Waiver. I further acknowledge that I have the right to consult with an attorney or other individual of my choosing prior to signing this Waiver and state that I either have so consulted or hereby knowingly decline to do so.

Witness Signature

Signature of Deputy

Date:

**MANATEE COUNTY SHERIFF'S OFFICE
SERVICES BRANCH
EMPLOYEE SERVICE RECORD**

<div> <div>WATSON-DUGAN</div> <div>APRIL</div> <div>MICHELLE</div> <div>D-86</div> </div> <div> <div>(Last Name)</div> <div>(First Name)</div> <div>(Middle Name)</div> <div>I.D. Number</div> </div>			
DATE	PERSONNEL ACTION	REMARKS	
05/05/97	NEW APPOINTMENT AS L/E DEPUTY, TRU UNIT		
09-30-97	APPROVED SALARY INCREASE		
10-14-97	TRANSFER TO L/E DEPUTY, FTEP UNIT, DISTRICT #3		
01-20-98	TRANSFER TO SQUAD #3 WEST, DISTRICT II , COMPLETED FTEP		
05-26-98	TRANSFER TO L/E DEPUTY, SQUAD #3E, DISTRICT #3		
05-10-99	APPROVED SALARY INCREASE		
11-23-99	COLLATERAL DUTY AS AN ASSOCIATE ADVISOR FOR MCSO EXPLORER POST		
2-1-2000	TRSF:L/E DEPUTY,SQD#4E,SECTION FOUR,DISTRICT#3		
4-25-2000	ANNUAL PAY INCREASE		
10-10-00	TRANSFER:L/E DEPUTY,SQUAD #6E, SECTION SIX, DISTRICT #3		
2-27-01	TEMPORARY TRANSFER- 3 MONTHS OR LESS:COPS DEPUTY,COPS TASK FORCE UNIT		
4-24-01	ANNUAL PAY INCREASE		
10-2-01	TRANSFER:PATROL DEPUTY,DIST#3,SQD#6E		
10-23-01	TRANSFER:BURGLARY DETECTIVE,PROPERTY CRIMES SECTION,CID DIVISION		
4-23-02	TRANSFER:CRIMES AGAINST JUVENILES DETECTIVE,CID DIVISION		
4-23-02	ANNUAL PAY INCREASE		
10-7-03	PROMOTION:DEPUTY SECOND CLASS,CHILD PROTECTION SECTION,CAC UNIT		
2-9-04	OTHER:APPOINTMENT TO MOUNTED PATROL		
5-31-04	OTHER:RESIGNATION FROM MOUNTED PATROL		
8-24-04	TRANSFER:DETECTIVE,PROPERTY CRIMES SECTION,BURGLARY UNIT		
10-5-04	ANNUAL PAY INCREASE		
3-29-05	OTHER:POSITION/TITLE APPOINTMENT AS MEMBER OF CERT/TACT, SPECIAL TEAM BUREAU		
5-31-05	DISCIPLINARY ACTION:#1583,8.6 HR SUSPENSION W/O PAY G.O.1013,2.11.2.4		
6-14-05	TRANSFER:PATROL DEPUTY,SQUAD 6W,SECTION 6, D-3 DIV.		
10-4-05	ANNUAL PAY INCREASE		

MCSO FM 87-081 (Rev 06/99)

[illegible]

**MANATEE COUNTY SHERIFF'S OFFICE
SERVICES BRANCH
EMPLOYEE SERVICE RECORD**

<div> <div>WATSON-DUGAN</div> <div>APRIL</div> <div>MICHELLE</div> <div>D-86</div> </div>			
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10-4-05	ANNUAL PAY INCREASE		

20283
RECEIVED

FEB 05 1997

PERSONNEL SECTION

Revised 3/96

SHERIFF'S OFFICE

LAW ENFORCEMENT EMPLOYMENT APPLICATION FORM

The Sheriff's Office is an Equal Employment Opportunity Employer. We consider applicants for all positions without regard to race, color, national origin, sex, age, disability, marital status, religion or any other legally protected status.

NOTICE: The following additional documents must be attached to this application:

1. A certified copy of birth certificate
2. A certified copy of high school diploma or Florida Police Standards approved G.E.D.
3. A copy of military discharge(s).

MANATEE

COUNTY

DATE: 1-25-97

POSITION APPLYING FOR:

- ☒ Deputy Sheriff
- ☐ Correctional Officer
- ☐ Law Enforcement Academy Sponsorship or Internship
- ☐ Law Enforcement Related Non-Certified Positions
(Other positions use other application form)

INSTRUCTIONS

Application must be typewritten or printed legibly in ink. All questions must be answered. Applications which are not complete will not be considered. If space provided is not sufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application, and number answers to correspond with questions.

I understand that the submission of this application for sponsorship to a law enforcement academy does not constitute an application for employment or appointment with the sponsor-law enforcement agency. Moreover, I understand this law enforcement agency is under no obligation to sponsor me as a candidate for any law enforcement training program.

PERSONAL HISTORY

1. Full Name:

Watson-Dugan April Michelle
Last Name First Middle Abbv.

2. Other: List all other names you have used including circumstances and time periods you used them. (For example: maiden name, former name(s), alias(es), or nickname(s).)

Name	Circumstance	Dates From Mo./Yr.	Dates To Mo./Yr.
April M. Watson	maiden name	9/73	10/95

3. Date and Place of Birth:

Date of Birth _____ City _____ County _____ State _____ Country (if not the United States) _____

4. Are you a United States citizen? ☒ Yes ☐ No

If naturalized, please provide:

Date

Place

Court

Naturalization No.

5. Social Security Number: _____

6. Marital Status: ☒ Married ☐ Divorced ☐ Separated ☐ Widowed ☐ Never Married7. Do you have or have you ever applied for a passport? ☐ Yes ☒ No Passport No. _____8. Height: 5' 5" Weight: 175 lbs.

EDUCATION/TRAINING

1.	High School Name/Address	Dates Attended Mo./Yr.		Years Completed	Did You Graduate?	Type of Diploma
		From	To			
	Graether High School 16200 N. Dale Mabry Hwy. Tampa, FL 33618	8/89	6/90	1 year 10th grade	NO	N-A
	Chamberlain High School 9401 N. Boulevard Tampa, FL 33612	8/90	1/91	1/2 year 11th grade	NO	N-A
	Adult + Community Education Center 4602 N. Seminole Ave. Tampa, FL 33603	9/91	9/91	N/A	yes	G.E.D.

2.	*College/University Name/Address	Dates Attended Mo./Yr.		Credit Hours Earned		Did You Graduate?	Type of Degree
		From	To	Qtr.	Sem.		
	NONE						

*Attach diploma or official transcript from last institution of higher education attended.

Major N-A Minor N-A

3. Other Schools (Trade, Vocational, Business or Military):

Name/Address	Dates Attended Mo./Yr.		Credit Hours Earned	Area of Study	Did You Graduate?	Type of Degree or Certificate
	From	To				
Hillsborough Community College 201 15th St. Tampa, FL 33615	4/93	8/93	10	EM.S.	yes	Emergency Medical Tech.
Erwin VOC - Tech Tampa, FL 2010 E. Hillsborough 33610	4/95	6/95	0	Medical	yes	Medical Terminology
Hillsborough Community College 1404 Tech Blvd. Tampa, FL 33619	4/96	8/96	15	L.E.	yes	Basic Law Enforcement

4. Describe any awards, honors, citations, positions held in school organizations, and any other special recognition you received while attending school:

NONE

5. Indicate any foreign languages you can Speak: very little Spanish
Read: very little Spanish
Write: NONE

6. Indicate any law enforcement education/training:

Basic Law Enforcement Program at Hillsborough Community College
from 4/96 to 8/96. Certifiable Law Enforcement Officer FL by
FOLE 9/96 (state exam). Emergency Vehicle Ops Course by Tampa F.D. 8/93.

7. Did you receive a certificate for this training? ☒ Yes ☐ No Certificate Number: NO Number

8. Describe any special abilities, interests, and hobbies including the degree of proficiency:

I like to target shoot pistols, shotguns and rifles as a
hobby. I am accurate with all but most proficient with
a pistol.

9. Indicate any type of special license such as pilot, radio operator, etc., showing licensing authority, where the license was first issued, and date current license expires (except vehicle operator's license):

Emergency Medical Tech. by FLEMS. expires 12/96, CPR for Health Care
Providers by American Heart Association since NOV 1988 expires 8/88.
Security Officer by FL Div of Licensing expires 1/98, Certifiable LE Officer by FOLE

10. Indicate any special skills you possess and equipment you can use which may be related to law enforcement work. (For example: two-way radio communications, breathalyzer, speed detection equipment, firearms, computers):

two-way radio communications, emergency vehicle operations, report writing,
proficient w/ various types of firearms, dealing w/ the public in emergency and
crisis situations, investigations, medical emergency experience.

11. Have you had any training/education with K-9's? ☐ Yes ☒ No

If yes, provide details: _____

12. Would you be willing to be transferred to a K-9 unit, if necessary? ☒ Yes ☐ No
(I understand that there is a lesser rate of pay for non-duty time devoted to the care and maintenance of the animal.)

EMPLOYMENT HISTORY

1. List chronologically all employment beginning with present employment, including summer and part-time employment while attending school. All time must be accounted for. If unemployed for a period, set forth dates of unemployment.

Name & Address of Employer	Dates Worked Mo./Yr.		Salary	Title or Position	Name of Supervisor	Reason for Leaving
	From	To				
Name: St. Joseph's Hospital Address: 3001 M.L. King Jr. Blvd. City, State, Zip: Tampa, FL 33607 Area Code & Phone No.: 813 - 870-4000 ext. 3303	8/96	to Current	\$17.75 hr.	Security Officer <input checked="" type="checkbox"/> Full <input type="checkbox"/> Part-time	Jim Ward	Current
Name: Shooting Sports (gunrange) Address: 7811 N. Dale Mabry Hwy. City, State, Zip: Tampa, FL 33614 Area Code & Phone No.: 813 - 933-3000	7-95	to 8/96	\$5.00 hr.	Range Officer/ Sales <input checked="" type="checkbox"/> Full <input checked="" type="checkbox"/> Part-time	Gregory Matangone	I needed more money. Offered better job above.
Name: Borg - Warner Security Address: 8019 Himes Ave. Ste 505 City, State, Zip: Tampa, FL 33614 Area Code & Phone No.: 813 - 932-6164	1/96	to 3/96	\$5.00 hr.	Security Guard <input checked="" type="checkbox"/> Full <input type="checkbox"/> Part-time	Lt. Lou Denny	I was paid a lower than agreed salary and I didn't like the job. I went back to f/t at gunrange.
Name: Circle K Address: 5601 S. Florida Ave. City, State, Zip: Floral City, FL 34436 Area Code & Phone No.: 352 - 726-9464	12/95	to 12/95	\$4.50 hr.	Clerk <input type="checkbox"/> Full <input checked="" type="checkbox"/> Part-time	Kathy (manager)	We moved back to Tampa due to lack of sufficient work in the area.
Name: Fantastic Sam's Address: 2609 E. Gulf to Lake Blvd. City, State, Zip: Inverness, FL 34450 Area Code & Phone No.: 352 - 637-7244	11/95	to 12/95	\$4.50 hr.	Receptionist <input type="checkbox"/> Full <input checked="" type="checkbox"/> Part-time	Karlunn (manager)	I was offered more hours at the above job.

2. Have you ever been dismissed or asked to resign or had any disciplinary action taken against you from any employment or position you have held? ☐ Yes ☒ No
3. Have you resigned, or left a job by mutual agreement following allegations of misconduct or unsatisfactory job performance? ☐ Yes ☒ No If yes to question #2 or #3, please provide details.

4. Have you ever applied to or performed paid or unpaid services for a law enforcement agency not listed as an employer? ☒ Yes ☐ No If yes, please provide name of agency and date of application or service.

Polk S.O. 10/96, Hillsborough S.O. 10/96, Tampa P.D. 3/95, ^{BARTOW P.D.} ~~Herrando~~ S.O. 12/96.

5. Do you own a business, or are you a partner or corporate officer in any business or organization not listed previously as a current or former employer? ☐ Yes ☒ No If yes, please provide name and address of business, corporation or organization and describe your relationship or position.

8/24/96 4-3-97
cont. employment history see attached list.

2. Date and type of discharge: _____

3. Are you now or have you ever been a member of a reserve unit or the National Guard? ☐ Yes ☒ No

4. If yes state the branch of service, name and location of your unit and whether you attend drills, meetings, or camps:

5. Was any type of disciplinary action taken against you in the service? ☐ Yes ☒ No If yes, please provide:

Date: _____ Place: _____

6. Have you ever served in the Armed Forces of a foreign country. ☐ Yes ☒ No
If yes, please specify countries and dates.

7. Are you designated as disabled because of any military service? ☐ Yes ☒ No

8. **VETERANS' PREFERENCE:** Check the appropriate block if you are claiming veterans' preference. **Documentation substantiating your claim must be furnished at the time of application.** *N-A*

- ☐ 1. A veteran with a service-connected disability who is eligible for or receiving compensation, disability retirement, or pension under public laws administered by the U.S. Veteran's Administration and the Department of Defense, or
- ☐ 2. The spouse of a veteran who cannot qualify for employment because of a total and permanent disability, or the spouse of a veteran missing in action, captured, or forcibly detained by a foreign power, or
- ☐ 3. A veteran of any war who has served on active duty for 181 consecutive days or more, or who has served 180 consecutive days or more since January 31, 1955 and who was honorably discharged from the Armed Forces of the United States of America if any part of such active duty was performed during a wartime era, excluding active duty for training, or
- ☐ 4. The unmarried widow or widower of a veteran who died of a service-connected disability.

Have you claimed and been employed using veterans' preference since October 1, 1987? ☐ Yes ☒ No

If "yes", please give name of employer: _____

NOTE: Under Florida law, preference in appointment shall be given first to those persons included in 1 and 2 above, and second to those persons included in 3 and 4 above. If an applicant claiming veterans' preference for a vacant position is not selected for the vacant position, he/she may file a complaint with the Division of Veterans' Affairs, P. O. Box 1437, St. Petersburg, Florida 33731.

PERSONAL REFERENCES & ACQUAINTANCES

1. Personal References: Give three (3) references (not relatives, former or present employers, fellow employees, or school teachers) who are responsible adults of reputable standing in their communities, such as property owners, business or professional men or women, who have known you well for the past five (5) years. If retired, give former occupation.

Complete Name <u>Martinez Jr., Mario</u> <small>(Last, First, Middle)</small>		Home Address: City & State: Home Phone: Business Address: City & State: Business Phone:
Yrs. Acq. <u>5</u>	Occupation <u>Detective w/ Hillsborough County Sheriff's Office (Warrants)</u>	

Complete Name <u>Bernt, Andreas</u> <small>(Last, First, Middle)</small>		Home Address: City & State: Home Phone: Business Address: City & State: Business Phone:
Yrs. Acq. <u>5</u>	Occupation <u>Lt. Macdill A.F.B. Fire Dept. / Sgt. Hillsborough County S.O.</u>	

Complete Name <u>Brownlee, Traci Dee</u> <small>(Last, First, Middle)</small>		Home Address: City & State: Home Phone: Business Address: City & State: Business Phone:
Yrs. Acq. <u>5</u>	Occupation <u>Medivac Dispatcher for T.C. Hosp. Aeromed. Deputy Hillsborough County S.O.</u>	

2. Social Acquaintances: Give three (3) social acquaintances in your own age group (including both sexes) who have known you well for the past five (5) years.

Complete Name <u>Vazquez, Mark Winston</u> <small>(Last, First, Middle)</small>		Home Address: City & State: Home Phone: Business Address: City & State: Business Phone:
Yrs. Acq. <u>5</u>	Occupation <u>Police Officer Tampa Police Dept</u>	

Complete Name <u>Nelson, Billie Joe</u> <small>(Last, First, Middle)</small>		Home Address: City: Home: Bus: City: Business Phone:
Yrs. Acq. <u>5</u>	Occupation <u>Police Officer F.T.O. Tampa Police Dept.</u>	

Complete Name <u>Sales, Janene Michelle</u> <small>(Last, First, Middle)</small>		Home Address: <u>4710 Emerald Forest Way # 2203</u> City & State: <u>Orlando, FL 32809</u> Home Phone: <u>(407) 648-5565</u> Business Address: <u>7071 International Drive</u> City & State: <u>Orlando, FL 32809</u> Business Phone: <u>(407) 352-7618</u>
Yrs. Acq. <u>15</u>	Occupation <u>Waitress at Chili's restaurant</u>	

ORGANIZATION MEMBERSHIP

1. List all clubs, societies of which you are or have been a member: *NONE*

Name	City & State	Former	Present (list position held & describe activity)
<i>N/A</i>			

2. Are you now or have you ever been a member of any foreign or domestic organization, association, movement, group or combination of persons which has adopted, or shows a policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means? ☐ Yes ☒ No
3. Have you ever made a financial or other material contribution to any organization of the type described in question #2 above? ☐ Yes ☒ No If yes to question #2 or #3, answer questions #4 and #5 also.
4. At the time of your membership, participation, or contribution, did you know of any unlawful aims of the organization? *N/A* ☐ Yes ☒ No
5. Did you intend to promote any unlawful aims of the organization? ☐ Yes ☒ No *N-A*
If yes to question #2, #3, #4, or #5, explain including name of organization and location.

N-A

BUSINESS INTERESTS & LICENSES

1. Do you or have you ever owned any stock or interest in any firm, partnership or corporation dealing wholly or partly in the sale or distribution of alcoholic beverages? ☐ Yes ☒ No
2. Are you now issued or have you ever been issued a license to engage in a business or profession? ☒ Yes ☐ No
3. Was license ever cancelled, suspended or revoked? ☐ Yes ☒ No
If yes to question #1, #2 or #3, please provide details including the type of license or certificate, the agency that issued the license, effective date of license and license number.

#2) E.M.T. by State of FL E.M.S., NOV 1993 #JT0074087.

Security Officer, State of FL Division of Licensing, Jan 1996, # 9600301

Certifiable Law Enforcement Officer, FDLE, Sept 1996 NO #.

CREDIT DATA

1. Do you have any sources of income other than your salary or the salary of your spouse? ☐ Yes ☒ No
Specify each with an estimated annual amount.
-
2. Are you or your spouse indebted to anyone? ☒ Yes ☐ No If yes, please list all debts over \$500. Be sure to include student loans and charge accounts. Also, list any debt where payment is **past due**, regardless of amount.
- | Creditor | Address | Amount | Loan or Account Number |
|----------|---------|--------|------------------------|
| | | | |
| | | | |
| | | | |
3. Have you, your spouse, or a company controlled by you filed for bankruptcy? ☐ Yes ☒ No, or declared bankrupt? ☐ Yes ☒ No, or had a legal judgment rendered against you for a debt? ☐ Yes ☒ No
If yes to any of these questions, please provide details.
-

APPLICANT'S CERTIFICATION

I understand that my appointment or employment will be contingent upon the results of a complete background investigation. I am aware that any omission, falsification, misstatement or misrepresentation will be the basis for my disqualification as an applicant or my dismissal from the Sheriff's Office. I agree to the conditions and certify that all statements made by me on this application are true, correct and complete, to the best of my knowledge. I further fully understand and consent to a polygraph examination concerning the veracity of my responses to the information requested on this application or which is discovered as a result of the background investigation, or any physical examination or drug test. I also understand that I will be fingerprinted. I understand that this employment application shall become the property of the Sheriff's Office and that it and the information received in response to the background examination are public records.

I also understand that I may be required to furnish the Sheriff's Office with a copy of my Income Tax Return for the year preceding this application and for each year during my employment or appointment.

I further understand and agree that my employment or appointment will be contingent upon the results of a complete drug test and that I may be required to take drug tests during the term of my employment or appointment with the Sheriff's Office.

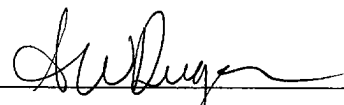
I understand that the use of drugs or alcohol is not permitted, during work or duty time, whether paid or unpaid, in the areas, including vehicles, where work is performed by employees or appointees.

I understand that my continued employment or appointment may be contingent upon the results of medical or psychological examinations that I may be required to take during the term of my employment or appointment and the maintenance of personal physical fitness, to the degree necessary, to satisfactorily perform the duties of my position or assignment with the Sheriff's Office.

I understand and agree that any employment or appointment offered to me will be contingent upon my acceptance of compensatory time off, instead of cash, in payment for overtime hours that I work, to the extent allowed by law. I understand, however, that the Sheriff has the absolute discretion to periodically substitute cash, in whole or part, for my accrued compensatory time.

I authorize any of the persons or organizations referenced in this application to furnish information, personal or otherwise, regarding my ability and fitness for employment or appointment with the Sheriff's Office and I relieve all such parties from any and all liability for any damage that might result from furnishing such information to the Sheriff's Office.

I agree to conform to the rules, regulations and orders of the Sheriff's Office and acknowledge that these rules, regulations and orders may be changed, interpreted, withdrawn or added to by the Sheriff's Office, at its discretion, at any time and without any prior notice to me.



 Signature of the applicant as usually written

1-26-97

 Date

Witnessed by:

Officer David Zane, Tampa Police Department

RESIDENCES

1. Actual places of residence for past 10 years – list chronologically all addresses, including residences while at school and in military. For college on campus residences, give dormitory name, city and state. If residences in military service cannot be shown as street address, indicate complete military unit designation and location by city and state. If post office box, give location of post office.

Dates Mo./Yr.		Apt. No.	Street Address	City	County	State
From	To					

--	--	--	--	--	--	--

ARREST HISTORY/COURT DATA

1. Have you ever been arrested, charged or received a notice or summons to appear for any criminal violation? ☒ Yes ☐ No
2. Have you ever received a ticket or been charged with a traffic violation (exclude parking tickets)? ☒ Yes ☐ No
3. To your knowledge, has any member of your family ever been arrested for other than traffic violations? ☒ Yes ☐ No
If yes to question #1, #2 or #3, list all such matters even if not formally charged, or no court appearance, or found not guilty, or nolo contendere to any charge for which adjudication was withheld, or matter settled by payment of fine or forfeiture of collateral. (Include your juvenile record and records of your arrest(s) which have been sealed, if any.)

	Date	Place & Department	Charge	Court & Place	Disposition
#1	NOV. 1988	Tampa Police Dept.	Peti- (I think) Theft	Hillsborough County	Community Service JUVENILE EXPUNDED
#2	NOV. 14th 1994	Tampa Police Dept.	Careless driving	"	Dismissed in court
	Relative's Name	Place & Department	Charge	Court & Place	Disposition
#3		Tampa Police Dept.	Peti Theft	Hillsborough County	Community Service

Provide details for each response to question #1, #2, or #3: #1) This was as a juvenile I was in a store with a girl who was shoplifting (I didn't know), as we were leaving the store she handed me her bag then we were grabbed by Store Security and both charged. #2) I wasn't driving careless + the charge was dismissed. #3) I don't know details that was my mother

4. Have you or your spouse ever been a plaintiff or defendant in a court action? ☒ Yes ☐ No
5. Have you ever been detained by any law enforcement officer for investigative purposes or to your knowledge have you ever been the subject of or a suspect in any criminal investigation? ☒ Yes ☐ No
6. Have you ever been fingerprinted for any reason (arrest, job application, military, etc.)? ☒ Yes ☐ No
If yes to questions #4, #5 or #6, please provide details.

#4) I was the plaintiff in my divorce. #5) for questions #1 and #2. #6) by Tampa Police on 3/20/95, by Hillsborough S.O. on 10/93, 1/96 and 10/96 all for pre-employment screenings; And by Hillsborough S.O. on 2/96 for my concealed weapons permit.

DRIVING HISTORY

1. Are you a licensed Florida automobile operator or chauffeur? ☒ Yes ☐ No License No.: W325-013-73-840-1
Date of Expiration: [REDACTED] Restrictions: NONE
2. Do you hold or have you ever held an operator or chauffeur license in another state? ☐ Yes ☒ No If yes, please provide state(s), name used and approximate dates license(s) was/were held.

3. Have you ever been denied issuance of a license or have you ever had a license suspended or revoked? ☐ Yes ☒ No
If yes, please provide complete details including why license was revoked.

MILITARY HISTORY

1. Have you ever served on active duty in the Armed Forces of the United States? ☐ Yes ☒ No
- Branch of Service: _____ Highest Rank: _____
- Serial #: _____ Duty Dates: From: _____ To: _____ From: _____ To: _____
From: _____ To: _____ From: _____ To: _____

PAST EMPLOYERS

- 1) ST. JOSEPH'S HOSPITAL: 3001 M.L.K. Jr. Blvd.
Tampa, Fl. 33607 (813)870-3303
title- Security Officer
Ops Supervisor- Jim Ward
from 8/96 to \$7.75 hr.
- 2) SHOOTING SPORTS: 7811 N Dale Mabry Hwy.
Tampa, Fl. 33614 (813)933-3000
title- Range Officer/Clerk
V.P.- Gregory Malangone
from 7/95 to 8/96 \$5.00 hr.
*OFFERED MORE MONEY
AT ABOVE JOB #1*
- 3) BORG-WARNER SECURITY: 8019 Himes Avenue Ste. 505
Tampa, Fl. 33614 (813)932-6164
title- Security Officer *818-2000*
Lt.- Lou Denny *DISCONTINUED*
from 1/96 to 3/96 \$5.00 hr.
*I WAS NOT GIVEN THE
WAGES AGREED UPON.*
- 4) CIRCLE K: 5601 S Florida Avenue
Floral City, Fl. 34436 (352)726-9464
title- Clerk
manager- Kathy
from 12/95 to 12/95 \$4.50 hr.
I MOVED BACK TO TAMPA
- 5) FANTASTIC SAM'S: 2609 E Gulf to Lake Blvd.
Inverness, Fl. 34450 (352)637-7244
title- receptionist
manager- Karlynn
from 1/10/95 to 12/95 \$4.50 hr.
*I WENT TO JOB #4
FOR MORE HOURS*
- 6) LAB CORP: 5610 LaSalle Road
Tampa, Fl. 33607 (813)289-5227
title- Lab Aid
supervisor- Donna West
from 6/95 to 10/95 \$6.85 hr.
*I WENT FULL TIME AT
JOB #2*
- 7) AM-STAT AMBULANCE
MEDICAL TRANSPORT: 4914 W Knox Street
Tampa, Fl. 33634 (813)885-7722
title- E.M.T. / Body Recoverer
supervisor- David Lineman
from 10/93 to 6/95 \$6.24 hr.
(Am-Stat was bought out
by "Med-Trans" in 10-96)
*I WENT TO THE LAB FOR BETTER
PAY.*
- 8) PIZZA HUT: 2304 E Bearss Avenue
Tampa, Fl. 33613 (813)971-4430
title- Waitress/Hostess
manager- Toni Keller
from 4/93 to 10/93 \$4.75 hr.
I FINISHED EMT SCHOOL

- 7) TARGET: 15420 N Dale Mabry Hwy.
Tampa, Fl. 33618 (813)962-2281
*I NEEDED A JOB CLOSER
TO HOME, I HAD NO CAR.* title- clerk/stock person
manager- Matt Baird
from 3/93 to 4/93 \$4.50 hr.
- 10) BIKE & SURF CENTER: 1510 [B] Gumbranch Road
Jacksonville, N.C. 28541
I MOVED BACK TO TAMPA (910)455-1972
title- Clerk
owners- Margaret & Bob Royster
from 1/93 to 2/93 \$5.00 hr.
- 11) I CAN'T BELIEVE IT'S 1510 [A] Gumbranch Road
YOGURT: Jacksonville, N.C. 28541
*THE STORE CLOSED
FOR THE WINTER* (910)455-1972
title- Manager
ownrs- Roysters
from 5/92 to 12/92 \$5.00 hr.
- 12) WINN DIXIE: 8438 N Armeina Avenue
*I MOVED TO N.C.
WITH MY HUSBAND WHO
WAS IN THE USMC* Tampa, Fl. 33604 (813)931-5918
title- Cashier
manager- Orbe Andux
from 12/91 to 5/92 \$4.75 hr.
- 13) JEWEL OSCO: 15020 N Dale Mabry Hwy.
(store went out Tampa, Fl. 33618 (813) NONE
of business) title- Cashier
manager- Mr. Nash
from 5/91 to 12/92 \$4.50 hr.
- 14) INVENTORIES SPECIALISTS: 5555 W Waters Avenue
*THIS WAS A
TEMP JOB* Tampa, Fl. 33634 (813)933-2719
title- Data Entry Clerk
manager- Norbert Wein
from 11/90 to 5/91 \$4.75 hr.

PAST EMPLOYERS

- 1) ST. JOSEPH'S HOSPITAL: 3001 M.L.K. Jr. Blvd.
Tampa, Fl. 33607 (813)870-3303
title- Security Officer
Ops Supervisor- Jim Ward
from 8/96 to \$7.75 hr.
- 2) SHOOTING SPORTS: 7811 N Dale Mabry Hwy.
Tampa, Fl. 33614 (813)933-3000
title- Range Officer/Clerk
V.P.- Gregory Malangone
from 7/95 to 8/96 \$5.00 hr.
- 3) BORG-WARNER SECURITY: 8019 Himes Avenue Ste. 505
Tampa, Fl. 33614 (813)932-6164
title- Security Officer
Lt.- Lou Denny
from 1/96 to 3/96 \$5.00 hr.
- 4) CIRCLE K: 5601 S Florida Avenue
Floral City, Fl. 34436 (352)726-9464
title- Clerk
manager- Kathy
from 12/95 to 12/95 \$4.50 hr.
- 5) FANTASTIC SAM'S: 2609 E Gulf to Lake Blvd.
Inverness, Fl. 34450 (352)637-7244
title- receptionist
manager- Karlynn
from 11/10/95 to 12/95 \$4.50 hr.
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Tampa, Fl. 33607 (813)289-5227
title- Lab Aid
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from 6/95 to 10/95 \$6.85 hr.
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Tampa, Fl. 33604 (813)931-5918
title- Cashier
manager- Orbe Andux
from 12/91 to 5/92 \$4.75 hr.
- 13) JEWEL OSCO: 15020 N Dale Mabry Hwy.
(store went out of business) Tampa, Fl. 33618 (813) NONE
title- Cashier
manager- Mr. Nash
from 5/91 to 12/92 \$4.50 hr.
- 14) INVENTORIES SPECIALISTS: 5555 W Waters Avenue
Tampa, Fl. 33634 (813)933-2719
title- Data Entry Clerk
manager- Norbert Wein
from 11/90 to 5/91 \$4.75 hr.

CERTIFICATION OF APPLICANT

For Special Process Server Only

I understand that any employment offered to me will be contingent upon the results of a complete character and fitness investigation, and I am aware that wilfully withholding information or making false statements on this application will be the basis for dismissal from the Sheriff's Office. I agree to these conditions and I hereby certify that all statements made by me on this application are true and complete, to the best of my knowledge. I understand that I may be required to submit to the Sheriff's Office a copy of my Income Tax Return for the year prior to employment and may be required to submit a copy of my Income Tax Return each year thereafter while employed by the Sheriff's Office. I also understand and agree that this employment application shall be the property of the Sheriff's Office.

I understand that any employment offered to me will be at the pleasure of the Sheriff who shall retain the power to revoke my appointment at any time that he determines that I am not fully and properly discharging the duties of the office.

I understand that I shall be disinterested in any process I may serve and that any employment offered to me will be contingent upon appointment by the Sheriff whereby I will swear under oath to honestly, diligently, and faithfully exercise the duties of my office.

Signature of the applicant as usually written

Date

We, the undersigned, do hereby swear under oath to personally know _____, to vouch for his or her good moral character and to have witnessed the signature of _____ this _____ day of _____, 19____.

Witnessed by: _____

Witnessed by: _____

DOCUMENTS TO BE ATTACHED TO APPLICATION

1. Attach a certified copy of birth certificate.
2. Attach a certified copy of high school diploma or Florida Police Standards approved G.E.D.
3. Attach a copy of military discharge(s).
4. Attach a certified copy of an executed bond in the amount of \$1,000 with a surety company authorized to do business in Florida.
5. Attach application fee of \$15 (check or money order only).

OTHER REQUIREMENTS

When ordered by the Sheriff's Office, applicant will be fingerprinted and shall submit to a complete physical examination and electrocardiogram, if desired.

REMARKS

PERSONAL INQUIRY WAIVER
Authority for Release of Information

TO: Concerned Person or
Authorized Representative of
Any Organization, Institution
or Repository of Records

APPLICANT'S NAME: April M. Watson-Dugan

DATE OF BIRTH: [REDACTED]

SOCIAL SECURITY NO.:

I respectfully request and authorize you to furnish the Manatee County Sheriff's Office any and all information that you may have concerning my work record, school record, military record, reputation, and financial and credit status. Please include any and all reports including all information of a confidential or privileged nature, and photostats of same, if requested. This information is to be used to assist in determining my qualifications and fitness for the position I am seeking with the Sheriff's Office.

I hereby release you, your organization or others from any liability or damage which may result from furnishing the information requested above.

[Signature]
Applicant's Signature

1-26-97
Date

City

State

Zip Code

AFFIDAVIT

STATE OF FLORIDA

COUNTY OF Hillsborough

Subscribed and sworn to (or affirmed) before me on January 26, 1997 (date) by David Torres

(name of affiant). He/She is personally known to me or has presented Florida Drivers License [REDACTED]
(type of identification) as identification.

(SEAL)

Signature David Torres, Officer Badge 844

Name David Torres,

Title NOTARY PUBLIC Officer Tampa P.D.

Commission No.: _____ Expires: _____

CONFIDENTIAL EMPLOYEE HISTORY

THE INFORMATION CONTAINED HEREIN IS CONFIDENTIAL
AND WILL NOT BE MADE AVAILABLE FOR PUBLIC INSPECTION.

1. Applicant's Current Address:

State Zip Code

Telephone Number

2. Spouse's Name and Address (if different):

Name

Address

City County State Zip Code

3. Children's Names and Ages:

Name	Age	Address (if different)
NONE		

4. Former Spouse(s) Name and Address:

Name

Address

City County State Zip Code

5. Are you now able to participate with or without accommodation in defensive tactics, firearms or physical training, operation of a motor vehicle, or otherwise perform the duties set forth in the job description or task analysis related to the position for which you applied? ☒ Yes ☐ No

6. This position may require a physical agility test, if such a test or examination is required, would you be able to take this test or examination with or without an accommodation? ☒ Yes ☐ No
☐ Yes ☐ No

7. Explain what accommodation(s) you would need to perform these tasks or take the test or examination.

NONE

(CUT & DETACH ALONG THIS DOTTED LINE)

8. Do you now, or have you possessed, ~~supplied~~, or ~~sold~~ any narcotic or controlled substance such as, but not limited to, marijuana, hashish, cocaine, LSD, amphetamines, heroin, steroid or any drug of a similar nature? ☒ Yes ☐ No
If yes, please complete the following:

a. Drug: marijuana
b. Circumstances: I was a stupid young person this day.
c. Number of times possessed/supplied/sold: 1 (one)
d. First time possessed/supplied/sold: Mid 1988
e. Last time possessed/supplied/sold: Same as first

9. Do you currently use any narcotic or controlled substance, such as those listed in question 9 or have you used such a narcotic or controlled substance within the last year? ☐ Yes ☐ No
10. Please provide name and address of next of kin or other person to be contacted in case of an emergency:

Home Phone

Business Phone

11. Please provide the name and address of your personal or family physician to be contacted in case of an emergency:

Name Dr. David Lubin
Address 2416 Cleveland Street Tampa Florida 33609
City State Zip Code
(813) 253-3164
Business Phone

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D A

TO: All Certified Employees

FROM: Charles B. Wells, Sheriff

DATE: December 17, 1996

SUBJECT: DOMESTIC VIOLENCE

Pursuant to the Omnibus Consolidated Appropriations Act of 1997, any person convicted of a misdemeanor crime of violence, as defined by the Act is prohibited from shipping, transporting, possessing, or receiving firearms or ammunition. There is no 'official use' exemption to this prohibition. Accordingly, the MANATEE County Sheriff's Office is requiring that every officer granted the authority to bear arms by the Sheriff submit the following Affidavit in compliance with the new law.

A conviction shall not apply for the purpose of this new law UNLESS:

- (A) The person was represented by counsel in the case or knowingly and intelligently waived the right to counsel in the case, and;
- (B) If the person was entitled to a trial by jury under the laws of the convicting jurisdiction then the conviction must have resulted from:
 - (1) A trial by jury;
 - (2) The person knowingly and intelligently waived the right to have the case tried by a jury, by guilty plea or otherwise.

APRIL M. WATSON-DUGAN

OBJECTIVE: To continue a successful **Law Enforcement** career utilizing my experience and training.

EDUCATION: **Certificate of Achievement – 1996**
Police Academy, Tampa, Florida
State Certified Law Enforcement Officer
Letter of Recommendation from Harry Lee Coe, State Attorney
Letter of Recommendation from Malcolm Beard, State Senator
Certificate of Achievement – Medical Terminology – 1995
Erwin Vocational School, Tampa, Florida

Emergency Medical Terminology (EMT) Certificate – 1993
Hillsborough Community College, Tampa, Florida
EMT Certificate JT0074087

SUMMARY OF QUALIFICATIONS:

- **Talented independent worker with knowledge of the community and the legal system...Able to excel in establishing rapport and trust across the vast spectrum of personalities.**
- **Excellent communication abilities and interpersonal skills...Able to motivate and interact comfortably with all backgrounds as well as all levels of management.**
- **Ability to identify, solve and follow-up potential and real problems.**
- **Demonstrated skills in counseling and motivating others through example with positive attitude and open communications.**
- **Ability to act as liaison to service provider, community and legal agencies.**

EXPERIENCE:

8/96 to Present

ST. JOSEPH'S HOSPITAL, Tampa, Florida

Security Officer

Responsible for the personnel security and ensures a safe environment throughout the hospital for employees, visitors and patients. Accountable for controlling any emergency or crisis situations that may occur. Assist the Security Manager and the Security Shift Supervisor with all routine investigations.

1995 to 1996

SHOOTING SPORTS GUN RANGE, Tampa, Florida

Range Officer

Responsible for the knowledge and servicing of various types of weapons. Accountable for the supervision and training customers.

1993 to 1995

AMSTAT MEDICAL TRANSPORT, Tampa, Florida

EMT

Performed patient care in emergency situations and provided assistance of body recovery for the County Medical Examiner.



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

January 17, 1997

Dear Ms. Watson-Dugan:

Your inquiry pertaining to employment opportunities with the Manatee County Sheriff's Office has been received.

The attached employment application must be completed in its entirety, either typed or printed.

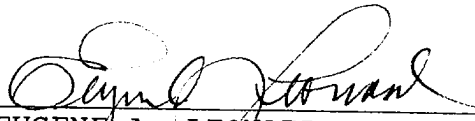
The accompanying list of documents to be supplied and attached to the applications must be complete. If for any reason documents are omitted, your application will be returned until such time as you supply all requested documents.

Upon receipt of your completed application, we will review it to be sure all required documents are included. It is advisable that you call us within a few days of your mailing your application. At that time, we will advise you of any needed information and, if everything is in order, we will schedule you for an Oral Interview.

If you have any questions, or if this office can be of any assistance, please contact Sandra Sakas, Personnel Specialist, at (941) 747-3011, Extension 2397.

Sincerely yours,

CHARLES B. WELLS, SHERIFF
Manatee County, Florida


EUGENE A. LEONARD, DIRECTOR
Personnel Section

CBW/GAL/sms

An Accredited Agency

November 26, 1996

Dear Law Enforcement Agency Personnel Department,

I am very interested in applying for the position of Law Enforcement Officer.

Enclosed is a copy of my current resume.

Will you please send me an application & the necessary qualifications for this position ?

Please send the information to:

Sincerely,
April M. Watson-Dugan

*P.S. also enclosed is
a copy of my T.A.B.E.
scores. Taken on 9-20-96.*

APRIL M. WATSON-DUGAN

OBJECTIVE: To continue a successful **Law Enforcement** career utilizing my experience and training.

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State Certified Law Enforcement Officer
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Range Officer

Responsible for the knowledge and servicing of various types of weapons. Accountable for the supervision and training customers.

1993 to 1995

AMSTAT MEDICAL TRANSPORT, Tampa, Florida

EMT

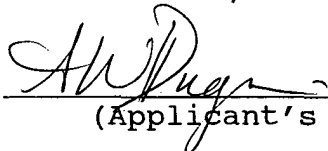
Performed patient care in emergency situations and provided assistance of body recovery for the County Medical Examiner.

**MANATEE COUNTY SHERIFF'S OFFICE
PRE-EMPLOYMENT WAIVER**

In accordance with the provisions of Florida State Statutes, an applicant is required to meet certain criteria in order to be qualified.

I understand that as part of the pre-employment process, the Manatee County Sheriff's Office will conduct an in-depth background investigation in an effort to determine my suitability to fill the position for which I have applied. In keeping with the efforts of the Manatee County Sheriff's Office to identify the most qualified individuals, I do hereby consent and understand that the information provided will become public record. That information concerning date birth, sex, race, height, weight, eyes, hair, and place of birth, and other information asked on the MCSO FM 89-039 (Revised 6/22/89) and on the Pre-Candidate Survey, MCSO FM 88-075 (Revised 5/89), is necessary for identification purposes relevant to requisite background information.

The purpose of this information is governed in part by Florida law requiring that each applicant applying for a position must be fingerprinted. Under the provisions of Statute 943.13, Florida Statutes an applicant must have a good moral character. A similar requirement is provided for in Rule 11 B-27.022, Florida Administrative Code.


(Applicant's Signature)

1-25-97
(Date)

MANATEE COUNTY SHERIFF'S OFFICE - AN EQUAL OPPORTUNITY EMPLOYER

MCSO FM 89-071

MANATEE COUNTY SHERIFF'S OFFICE
ADMINISTRATIVE BUREAU
INFORMATION FOR APPLICANTS

RE-APPLICATION, RE-TESTING, AND RE-EVALUATION OF AN APPLICANT NOT APPOINTED SHALL BE ALLOWED PROVIDED THAT NOTHING IN THE CANDIDATE'S BACKGROUND INDICATES AN UNFITNESS FOR APPOINTMENT; AND CANDIDATES SHOULD BE AWARE THAT SENSITIVE OR CONFIDENTIAL ASPECTS OF THEIR PERSONAL LIFE WILL BE EXPLORED AND THE FILE BECOMES PUBLIC RECORD UNDER FLORIDA LAW. RE-APPLICATION, RE-TESTING, AND RE-EVALUATION MAY BE MADE TWELVE (12) MONTHS FROM THE RECEIPT OF WRITTEN NOTIFICATION PROVIDED NOTHING IN THE CANDIDATE'S BACKGROUND INDICATES AN UNFITNESS FOR APPOINTMENT. CANDIDATES NOT ELIGIBLE FOR APPOINTMENT ARE INFORMED IN WRITING WITHIN THIRTY (30) CALENDAR DAYS OF SUCH DECISION.

ALL RECORDS OF CANDIDATES NOT APPOINTED SHALL BE MAINTAINED BY THE PERSONNEL SECTION FOR A PERIOD OF TIME PRESCRIBED BY THE FLORIDA STATE DEPARTMENT OF ARCHIVES.

CANDIDATE'S SIGNATURE: _____

J. W. Dyer

DATE: 1-25-97

PREFERENCE SHALL BE GIVEN TO CERTAIN VETERANS AND SPOUSES OF VETERANS FOR CERTAIN POSITIONS, AS PROVIDED BY CHAPTER 295, FLORIDA STATE STATUTES. EQUIVALENT COMBINATIONS OF EDUCATION AND EXPERIENCE MAY BE CONSIDERED.

**MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL SECTION**

CERTIFIED POSITION

NOTICE OF CONDITIONAL OFFER OF PROBATIONARY APPOINTMENT


You have completed the first phase of the application and screening process. You are hereby offered a "**Conditional Offer of Probationary Appointment**" for the position described below pending successful completion of the following:

- > Fitness Assessment
- > Polygraph Examination
- > Psychological Examination
- > Employment Eligibility Board
- > Drug Screen
- > Medical Examination, including
 - > Eye Examination
- > Background Investigation
- > MCSO Firearms Qualification (current certified applicants)
- > State of Florida Basic Recruit Certificate of Compliance in Law Enforcement/Corrections.

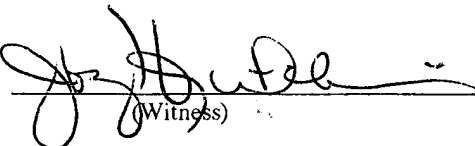
If any one of the above screening procedures or standards are not successfully completed to the satisfaction of this agency, then this **conditional** offer of appointment shall be deemed to be withdrawn. Additionally, if we find that between this conditional offer and the confirmed offer that funds are not available for the position for which you have applied, this offer may be withdrawn.

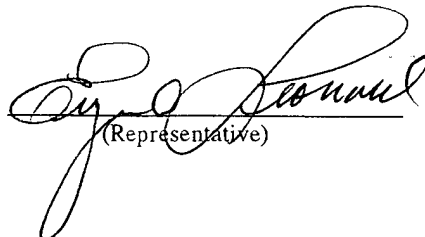
Should you successfully complete all the above listed screening procedures and standards, you will be placed in the Applicant Pool which will enable you to be eligible for appointment by the Sheriff. Placement in the aforementioned Applicant Pool **does not** assure appointment by the Sheriff.

ACKNOWLEDGEMENT: I APRIL MICHELLE WATSON-DUGAN, do solemnly attest that I have read the above and understand the **Notice of Conditional Offer of Probationary Appointment** for the position of L/E DEPUTY is subject to the limitations and conditions set forth above.


(Applicant's Signature)

3-10-97
(Date)


(Witness)


(Representative)

Preferred
Position

MANATEE COUNTY SHERIFF'S OFFICE
Applicant Control Sheet

Date: 4/10/97

TYPING TEST DATE:
WPM:

PERSONAL DATA

SHIFT WORK? Yes
ANY N/C? NO

NAME: APRIL MICHELLE WATSON-DUGAN DOB:
ADDRESS: 3812-58 ST
CITY: TAMPA STATE: FL ZIP: 33619
TELEPHONE: (H) (W) POB: FL
RACE: W SEX: F HGT: 505 WGT: 175 EYES: BLU HAIR: BLN SS#:
EXPERIENCE: Certified: (Y) N FL Cert # Out of State:
SALARY DISCUSSED WITH APPLICANT: DATE 3-10-97 TIME: 8:08 AM (PROCEED) HALT

DR LIC: ✓ S/S CARD: ✓ BIRTH CERT: ✓ H/S DIPL: ✓ TABE: ✓ 8/28/96
DD214: N/A NAME CHG: ✓ L/E CERT: ✓ C/O CERT: N/A STATE EXAM: Y ✓ N

TABE (CERT. POSITIONS ONLY) ADD 10 POINTS IF-SERVICE CONNECTED DISABILITY
12.9 X 2.326 = R -SPOUSE OF DISABLED VETERAN
12.9 X 2.326 = M -UNMARRIED WIDOW(ER) OF A VETERAN
12.9 X 2.326 = L ADD 5 POINTS IF-WITH A CAMPAIGN MEDAL
PLUS N/A = MULTIPLY TOTAL SCORE BY .50 = (1)

L/E-C/O ORAL INTERVIEW BOARD: DATE TIME
BOARD SCORE: MULTIPLY SCORE BY .50 = (2)
TOTAL OF LINES 1+2 =

CONDITIONAL OFFER OF PROB APPTNT: DATE 1st 3-10-97 / 2nd
STATEMENT OF POLICY SIGNED: DATE N/A
DOMESTIC VIOLENCE MEMO SIGNED (C/O-L/E APPLICANT): DATE 3-10-97

SIGNED MEDICAL RELEASE FORM: DATE 3-10-97

NCIC/FCIC: DATE 4/10/97 ACCEPTABLE ✓ NOT ACCEPTABLE COMPUTER: DATE 4/10/97 RED DOT: ✓

FINGERPRINTS: DATE 3-10-97

WONDERLIC PERSONNEL TEST: DATE N/A SCORE

FITNESS ASSESSMENT TEST: DATE 4/21/97 Score SCORE 3.2

BACKGROUND INTERVIEW: DATE 3-11-97 TIME 9:30

POLYGRAPH: DATE 3-13-97 TIME 1 PM

SPECIFIC: DATE TIME

PSYCHOLOGICAL: DATE 3-10-97 TIME 8:30

FIREARMS: DATE 3-19-97 TIME 1 PM (CURRENTLY CERTIFIED ONLY)

FILE REVIEW: PERSONNEL BACKGROUND (MUST BE COMPL. BEFORE EEB OR CIVIL. BD)

EMPLOYMENT ELIG. BOARD: DATE 4/03/97 ACCEPTABLE ✓ NOT ACCEPTABLE

REFERENCE LETTERS: Employer # Mailed 2 Date 4-3-97
Personal # Mailed 2 Date 4-3-97

CIVILIAN INTERVIEW BOARD: DATE TIME:

PHYSICAL: DATE 4/16/97 TIME 830 AM ACCEPTABLE

DRUG SCREEN: DATE 4/16/97 TIME ACCEPTABLE

EYE EXAM: DATE 4/17/97 TIME 240 AM ACCEPTABLE

HEARING EXAM: DATE N/A TIME ACCEPTABLE

Florida *The Sunshine State*

DRIVER LICENSE CLASS E

C416-019-73-840-0

APRIL WATSON
CULBREATH

DOB: [REDACTED] SEX: F
ISSUED: 06-25-2012 HGT: 5-05

EXPIRES: [REDACTED]

REST: [REDACTED]

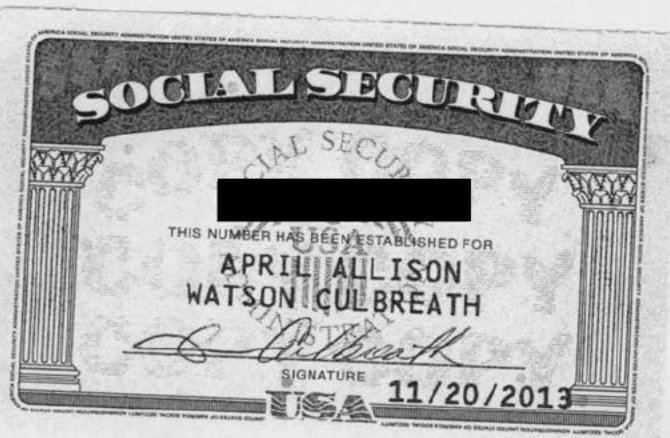
ENDORSE: [REDACTED]

REPLACED: 11-15-20 [REDACTED]

ORGAN DONOR

SAFE DRIVER

Operation of a motor vehicle constitutes consent to any sobriety test required by law.



This card belongs to the Social Security Administration and you must return it if we ask for it.

If you find a card that isn't yours, please return it to:
Social Security Administration
P.O. Box 33008, Baltimore, MD 21290-3008

For any other Social Security business/information, contact your local Social Security office. If you write to the above address for any business other than returning a found card you will not receive a response.

Social Security Administration
Form SSA-3000 (08-2011)



G31091226

SOCIAL SECURITY

SOCIAL SECURITY

THIS NUMBER HAS BEEN ESTABLISHED FOR

APRIL MICHELLE DUGAN

April M. Dugan
SIGNATURE

SIGNATURE

DEPARTMENT OF EDUCATION

State of



Florida

This Certifies That

APRIL M. WATSON

having satisfactorily completed all requirements of law and standards prescribed by the State Board of Education, thereby demonstrating satisfactory evidence of educational competence, is hereby awarded this

HIGH SCHOOL DIPLOMA

and is entitled to all the Rights and Privileges appertaining thereto.

In witness whereof our names and the seal of the State Board of Education, Tallahassee, Florida, are hereto affixed, this the
23RD DAY OF OCTOBER, 1991 NUMBER 529007



Betty Castor
COMMISSIONER OF EDUCATION

Robert L. Howell
DIRECTOR, DIVISION OF VOCATIONAL,
ADULT AND COMMUNITY EDUCATION

Department of Health • Vital Statistics
STATE OF FLORIDA
MARRIAGE RECORD
TYPE IN UPPER CASE
USE BLACK INK

This license not valid unless seal of Clerk,
Circuit or County Court, appears thereon.

(STATE FILE NUMBER)

00-31457

(APPLICATION NUMBER)

APPLICATION TO MARRY

1. GROOM'S NAME (First, Middle, Last) [REDACTED]			2. DATE OF BIRTH (Month, Day, Year) [REDACTED]		
3a. RESIDENCE - CITY, TOWN, OR LOCATION APOLLO BEACH	3b. COUNTY HILLSBOROUGH	3c. STATE FLORIDA	4. BIRTHPLACE (State or Foreign Country) VIRGINIA		
5a. BRIDE'S NAME (First, Middle, Last) APRIL MICHELLE WATSON		5b. MAIDEN SURNAME (If different)	6. DATE OF BIRTH (Month, Day, Year) [REDACTED]		
7a. RESIDENCE - CITY, TOWN, OR LOCATION APOLLO BEACH	7b. COUNTY HILLSBOROUGH	7c. STATE FLORIDA	8. BIRTHPLACE (State or Foreign Country) FLORIDA		

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9. SIGNATURE OF GROOM (Sign full name using black ink) [REDACTED]	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) AUGUST 4, 2000
11. TITLE OF OFFICIAL ANGELA L GARY DEPUTY CLERK	12. SIGNATURE OF OFFICIAL (Use black ink) [Signature]
13. SIGNATURE OF BRIDE (Sign full name using black ink) [Signature]	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) AUGUST 4, 2000
15. TITLE OF OFFICIAL ANGELA L GARY DEPUTY CLERK	16. SIGNATURE OF OFFICIAL (Use black ink) [Signature]

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17. COUNTY ISSUING LICENSE HILLSBOROUGH	18. DATE LICENSE ISSUED AUGUST 4, 2000	18a. DATE LICENSE EFFECTIVE AUGUST 7, 2000	19. EXPIRATION DATE OCTOBER 6, 2000
20a. SIGNATURE OF COURT CLERK OR JUDGE [Signature]		20b. TITLE DEPUTY CLERK	20c. BY D.C. AG

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE (Month, Day, Year) AUGUST 07, 2000	22. CITY, TOWN, OR LOCATION OF MARRIAGE BRANDON		
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) [Signature]		23c. ADDRESS (Of person performing ceremony) 743 W LUMSDEN ROAD	
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp) GRETCHEN WHITNEY DEPUTY CLERK		24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) [Signature]	
		25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) [Signature]	

26. SOCIAL SECURITY NUMBER GF	27. RACE [REDACTED]	28. WERE YOU EVER PREVIOUSLY MARRIED? <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES	IF ANSWER IS 'YES' TO ITEM 28, THEN COMPLETE ITEMS 29a, 29b, and 29c		
		29a. NO. OF THIS MARRIAGE 2	29b. LAST MARRIAGE ENDED BY (DEATH, DIVORCE OR ANNULMENT) DIVORCE	29c. DATE LAST MARRIAGE ENDED (Mo., Day, Year) JULY 15, 1998	
30. SOCIAL SECURITY NUMBER BRIDE	31. RACE WHITE	32. WERE YOU EVER PREVIOUSLY MARRIED? <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES	IF ANSWER IS 'YES' TO ITEM 32, THEN COMPLETE ITEMS 33a, 33b, and 33c		
		33a. NO. OF THIS MARRIAGE 3	33b. LAST MARRIAGE ENDED BY (DEATH, DIVORCE OR ANNULMENT) DIVORCE	33c. DATE LAST MARRIAGE ENDED (Mo., Day, Year) JULY 15, 1998	

APPLICATION NO. 41-004

MARRIAGE RECORD
FLORIDA

GROOM DATA	1. GROOM'S NAME (First, Middle, Last)		2. DATE OF BIRTH (Month, Day, Year)	
	[REDACTED]		[REDACTED]	
BRIDE DATA	5. BRIDE'S NAME (First, Middle, Last)		6. DATE OF BIRTH (Month, Day, Year)	
	APRIL MICHELLE WATSON		[REDACTED]	
AFFIDAVIT OF BRIDE AND GROOM	7. RESIDENCE - CITY, TOWN, OR LOCATION		8. BIRTHPLACE (State or Foreign Country)	
	CITRUS FL 34450 FL		[REDACTED]	
WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO MARRY THE SAME IS KNOWN TO US AND HEREBY APPLY FOR A LICENSE TO MARRY.				
13. SIGNATURE OF GROOM (Sign in presence of)				
14. SIGNATURE OF BRIDE (Sign in presence of)				
15. TITLE OF ISSUING OFFICIAL				
BETTY STRIFLER CLERK OF COURTS				
16. SIGNATURE OF ISSUING OFFICIAL				
BETTY STRIFLER CLERK OF COURTS				
17. DATE LICENSE ISSUED				
10/24/95				
18. EXPIRATION DATE				
12/22/95				
19. BY D.C.				
20. COUNTY OF THIS COURTS				
CITRUS				
21. I HEREBY CERTIFY THAT THE ABOVE NAMED BRIDE AND GROOM WERE JOINED IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA				
ON 10/24/95 AT INVERNESS CITY OR TOWN FLORIDA				
22a. SIGNATURE OF PERSON PERFORMING CEREMONY				
22b. NAME OF PERSON PERFORMING CEREMONY (Type or Print)				
SESAN M. GREEN				
22c. TITLE				
DEPUTY CLERK				
22d. ADDRESS				
110 N APOPKA AV. INVERNESS FL				
23. SIGNATURE OF WITNESS TO CEREMONY				
24. SIGNATURE OF WITNESS TO CEREMONY				
25. DATE RETURNED				
10/24/95				
26. RECORDED IN				
BOOK 41 PAGE 004				
27. CLERK OF COURT				
[REDACTED]				
28. RACE				
WHITE				
29. NUMBER OF THIS MARRIAGE				
1				
30. LAST MARRIAGE ENDED BY (SPECIFY DEATH, DIVORCE OR ANNULMENT)				
DIVORCE				
31. DATE LAST MARRIAGE ENDED				
12/06/94				
32. RACE				
WHITE				
33. NUMBER OF THIS MARRIAGE				
2				
34. LAST MARRIAGE ENDED BY (SPECIFY DEATH, DIVORCE OR ANNULMENT)				
DIVORCE				
35. DATE LAST MARRIAGE ENDED				
12/06/94				

HRS Form 743, Feb 91
(Replaces Jan 89 edition which may be used)This license not valid unless seal of Clerk,
Circuit or County Court, appears thereon.

AUDIT CONTROL NO.

940328

CERTIFIED TO BE A TRUE COPY
BETTY STRIFLER
CLERK OF COUNTY COURTBY: [Signature] D.C.
This 24 day of Oct, A.D. 1995

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT
IN AND FOR HILLSBOROUGH COUNTY, STATE OF FLORIDA
FAMILY LAW DIVISION

IN RE: THE MARRIAGE OF

APRIL M. WATSON,
Petitioner,

and

Respondent.

CASE NO. [REDACTED]

DIVISION: K

RECEIVED
FEB 10 1997
PERSONNEL SECTION

FINAL JUDGMENT

This action was heard before the court on December 6, 1994. Present before the Court were APRIL M. WATSON, Petitioner, and [REDACTED] Respondent. Both appeared Pro Se. On the evidence presented

IT IS ADJUDGED that:

1. The marriage is irretrievably broken, and the bonds of marriage between APRIL M. WATSON, Petitioner, and [REDACTED] Respondent are dissolved.

2. The parties have divided up their personal property with the exception of the Panasonic telephone and the two small tables which Husband shall give to Wife in good condition within three days of the date of this Order; the Respondent, Husband, shall retain the television set and television stand.

3. The parties have incurred a debt consolidation loan at Suncoast Schools Federal Credit Union in the amount of \$2,800.00. Petitioner and Respondent shall each pay \$55.00 to the Credit Union until this loan is paid in full.

4. The Respondent, [REDACTED] shall pay \$100.00 to Petitioner's father to replace the vacuum cleaner which he admits he threw away.

5. This court reserves jurisdiction over the parties and the subject matter in this cause for purposes of enforcement or modification as provided by law.

DONE AND ORDERED in Chambers, at Tampa, Hillsborough County, Florida, this 6 day of February, 1994.

/s/ Florence Foster
FLORENCE FOSTER
CIRCUIT JUDGE

Copies furnished to:
Petitioner
Respondent

IN THE CIRCUIT COURT OF THE TWELFTH JUDICIAL CIRCUIT
IN AND FOR MANATEE COUNTY, FLORIDA

FAMILY LAW DIVISION
CASE NO. [REDACTED]

IN RE: THE MARRIAGE OF:

[REDACTED], Husband
and

APRIL M. WATSON-DUGAN

_____, Wife /

BVS

FILED FOR RECORD
JUL 15 1998
CLERK OF CIRCUIT COURT
MANATEE COUNTY, FLORIDA

JUL 15 2 53 PM '98

FINAL JUDGMENT OF SIMPLIFIED DISSOLUTION OF MARRIAGE

THIS CAUSE was heard by the court on final hearing for simplified (uncontested) dissolution of marriage on July 15, 1998. The court, having reviewed the file and heard the testimony, makes these findings of fact and reaches these conclusions of law:

- This court has jurisdiction over the subject matter and the parties.
- At least one party has been a resident of the State of Florida for more than 6 months immediately before filing the Simplified Petition for Dissolution of Marriage.
- The parties have entered into a Marital Settlement Agreement, which is acceptable to both parties.
- The marriage between the parties is irretrievably broken.

THEREFORE, it is ORDERED AND ADJUDGED:

- The Marriage between the parties is dissolved and the parties are restored to the status of being single.
- The Marital Settlement Agreement, which has been filed as an exhibit in this case, is ratified and made a part of this judgment, and the parties are ordered to obey all of its provisions.
- ☒ yes or ☐ no
The Wife's former name of **APRIL M. WATSON** is restored.
- The court reserves jurisdiction to enforce the Marital Settlement Agreement.

DONE AND ORDERED in Manatee County, Florida on July 15, 1998.

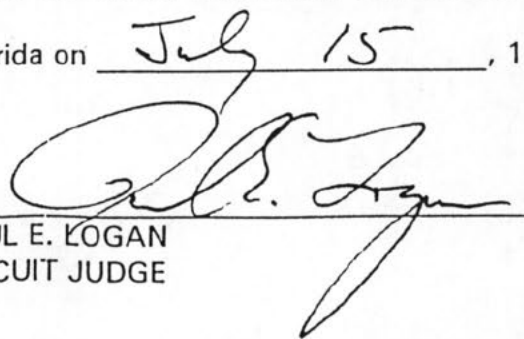
STATE OF FLORIDA, COUNTY OF MANATEE
This is to certify that the foregoing is a true and correct copy of the document filed in my office.

Witness my hand and official seal this 15 day of

July, 1998

R. B. MOORE, Clerk of Circuit Court

By: Isabella V. Moore p.c.


PAUL E. LOGAN
CIRCUIT JUDGE

Department of Health-Vital Statistics
STATE OF FLORIDA
MARRIAGE RECORD
 TYPE IN UPPER CASE
 USE BLACK INK

This license not valid unless seal of Clerk,
 Circuit or County court appears thereon

(STATE FILE NUMBER)

412013XX001703MLAXMA

(APPLICATION NUMBER)

APPLICATION TO MARRY

1 GROOM'S NAME (First, Middle, Last)		2 BRIDE'S NAME (First, Middle, Last)	
[REDACTED]		[REDACTED]	
3a RESIDENCE - CITY, TOWN, OR LOCATION	3b COUNTY	3c STATE	4 BIRTHPLACE (State or Foreign Country)
WIMAUMA	Hillsborough	Florida	Florida
5a BRIDE'S NAME (First, Middle, Last)	5b MAIDEN SURNAME (if different)	5c DATE OF BIRTH (Month, Day, Year)	
APRIL MICHELLE DUGAN	WATSON	[REDACTED]	
7a RESIDENCE - CITY, TOWN, OR LOCATION	7b COUNTY	7c STATE	8 BIRTHPLACE (State or Foreign Country)
WIMAUMA	Hillsborough	Florida	Florida

WE THE APPLICANTS NAMED IN THIS CERTIFICATE EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY

9 SIGNATURE OF GROOM (Sign full name using black ink)	10 SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)
[REDACTED]	10/29/2013
11 TITLE OF OFFICIAL	12 SIGNATURE OF OFFICIAL (Use black ink)
DEPUTY CLERK Nicole Dimon	<i>Nicole Dimon</i>
13 SIGNATURE OF BRIDE (sign full name using black ink)	14 SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)
[REDACTED]	10/29/2013
15 TITLE OF OFFICIAL	16 SIGNATURE OF OFFICIAL (Use black ink)
DEPUTY CLERK Nicole Dimon	<i>Nicole Dimon</i>

LICENSE TO MARRY

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17 COUNTY ISSUING LICENSE	18 DATE LICENSE ISSUED	19 DATE LICENSE EFFECTIVE	20 EXPIRATION DATE
Manatee	10/29/2013	10/29/2013	12/28/2013
21 SIGNATURE OF COURT CLERK OR JUDGE	22 TITLE	23 BY D.C.	
<i>[Signature]</i>	Honorable	Nicole Dimon MD	

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA

24 DATE OF MARRIAGE (Month, Day, Year)	25 CITY, TOWN, OR LOCATION OF MARRIAGE
11-13-2013	Parrish, Florida
26 SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink)	27 ADDRESS (for person performing ceremony)
<i>[Signature]</i>	3313 Evelyn Dr. Ellenton FL 34111
28 NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp)	29 SIGNATURE OF WITNESS TO CEREMONY (Use black ink)
CRANFORD W. MIZELL Ordained Minister	<i>[Signature]</i>
	30 SIGNATURE OF WITNESS TO CEREMONY (Use black ink)
	<i>[Signature]</i>

INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED

SEAL



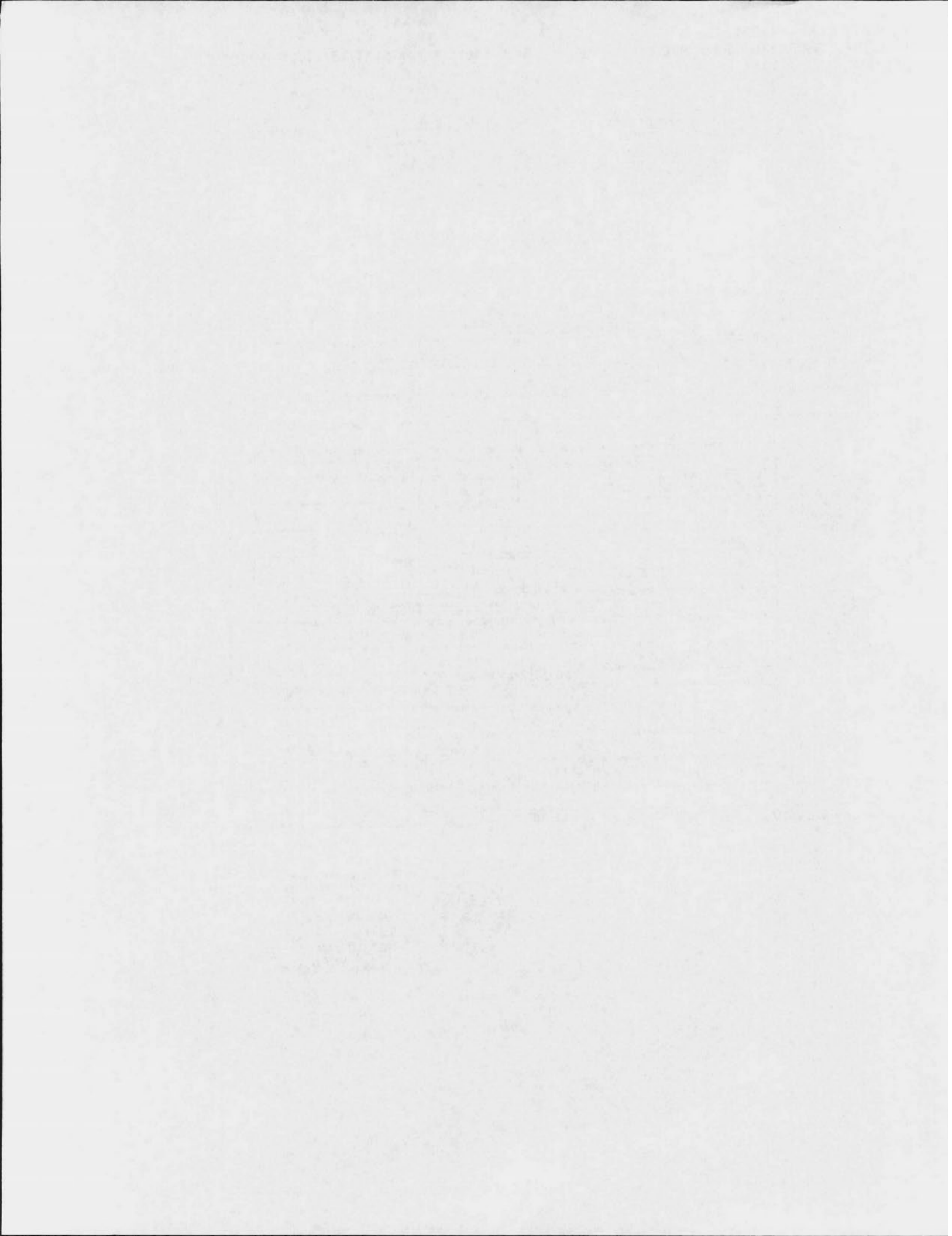
STATE OF FLORIDA, COUNTY OF MANATEE
 This is to certify that the foregoing is a true and correct copy of the documents on file in my office.

Witness my hand and official seal this 13 day of

November 2013

R. B. SHORE, Clerk of Circuit Court

By: *[Signature]*
 D.C.



September 20 1996

BREWSTER STUDENT SERVICES
CLIENT PROFILE

Page 1

=====

Ms. April Watson Dugan

SS# or ID [REDACTED]

PROGRAM : PROGRAM ADVISOR:

Level A - TABE 6

=====

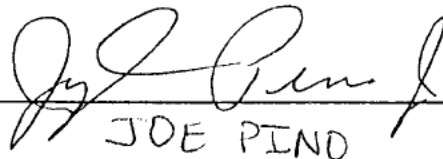
TABE6 2 Comprehension	:	Raw(37)	Scaled(789)	GE(12.9)	Percentile(96)
TABE6 3 Math Comp	:	Raw(39)	Scaled(821)	GE(12.9)	Percentile(94)
TABE6 5 Lang Mechanics	:	Raw(24)	Scaled(761)	GE(12.9)	Percentile(97)
TABE6 6 Lang Expression	:	Raw(43)	Scaled(835)	GE(12.9)	Percentile(99)

=====

I have read the above report:

Ms. April Watson Dugan

Counselor/Evaluator: _____


JOE PINO

Date: 9/20/96

Brewster W. Henry Voc-Tech Center
Tampa, Florida
(813)-276-5448

Florida Department of Law Enforcement

Exam Administration Number 96-028 - Exam Date 8/28/96



School: 099941 Hillsborough Community College

APRIL M DUGAN

SSN:

Discipline: LAW

ReTakeNo:

Form: LE ONE

Effective Date: 07311996

<u>Section #</u>	<u>Raw Score</u>	<u>Percent Correct</u>	<u>Status</u>
1	51	85%	Pass
2	54	90%	Pass
3	56	93%	Pass
4	51	85%	Pass
5	54	90%	Pass
Overall Exam Status:			Pass

CRIMINAL JUSTICE STANDARDS AND TRAINING COMMISSION

This report serves as your official grade notification of the results of your

FLORIDA OFFICER CERTIFICATION EXAMINATION

This exam is one of the prerequisites for certification as an officer. Section 943.133, Florida Statutes, provides additional information regarding employment and certification statutory requirements. The results of each section of the Certification Exam are reported above. Please see the last column entitled "Pass/Fail": PASS indicates a passing score was obtained on that section, FAIL indicates failure.

If this was your first time taking the exam and you did not pass all section(s) of the exam, you will be required to retake and pass only the section(s) failed.

OR

If this was your second time taking the exam and you did not pass all required section(s), you will be required to complete the basic training that corresponds to the exam area(s) failed before taking a second retake.

OR

If this was your third time taking the exam and you did not pass all required sections(s), you will be required to re-enter and successfully complete the entire basic training program and satisfy all requirements of the program. You must then apply for and retake the entire exam.

A new application must be submitted twenty-one days prior to your next requested exam date.

Include a copy of this notice with your new application.

Print Date: 9/16/96

LAW ENFORCEMENT REQUIRED COURSES

Section 1	Section 2	Section 3	Section 4	Section 5
CJD - 760 Legal 1	CJD - 763 Interpersonal Skills	CJD - 734 LE Investigations	CJD - 731 LE Patrol	CJD - 704 Defensive Tactics
CJD - 761 Legal 2	CJD - 762 Communications			CJD - 705 Weapons
CJD - 730 Legal 3				CJD - 723 Vehicle Operations
				CJD - 732 LE Traffic
				CJD - 254 Medical First Responder

CORRECTIONS REQUIRED COURSES

Section 1	Section 2	Section 3	Section 4	Section 5
CJD - 770 Legal 1	CJD - 773 Interpersonal Skills 1	CJD - 752 Correctional Operations	CJD - 750 Interpersonal Skills 2	CJD - 704 Defensive Tactics
CJD - 771 Legal 2			CJD - 772 Communications	CJD - 705 Weapons
				CJD - 254 Medical First Responder
				CJD - 741 Emergency Preparedness

CORRECTIONAL PROBATION REQUIRED COURSES

Section 1	Section 2	Section 3	Section 4
CJD - 790 CPO Legal	CJD - 704 Defensive Tactics	CJD - 792 CPO Interpersonal Skills	CJD - 794 CPO Supervision
	CJD - 254 Medical First Responder	CJD - 793 CPO Communication Skills	
	CJD - 795 Firearms		
	CJD - 791 CPO Operations		

BASIC LAW ENFORCEMENT TRAINING PROGRAM
FINAL GRADE REPORT

NAME: April W. Dugan SS#:
 CLASS DATE: 04/22/96 - 08/26/96 CLASS#: 96-3
 GRADE AVERAGE: 92.636% CLASS RANKING: 12 of 22

WRITTEN EXAMS	SCORE	GRADE	PASS/FAIL
LEGAL I	95 OF 100	95 %	PASS
LEGAL II	89 OF 100	89 %	PASS
PATROL	45 OF 50	90 %	PASS
TRAFFIC	92 OF 100	92 %	PASS
INVESTIGATION	89 OF 100	89 %	PASS
INTERPERSONAL COMMUNICATION	89 OF 100	89 %	PASS
VEHICLE OPERATION	21 OF 25	84 %	PASS
FIREARMS	50 OF 50	100 %	PASS
DEFENSIVE TACTICS	49 OF 50	98 %	PASS
C.P.R.	48 OF 50	96 %	PASS
MEDICAL FIRST RESPONDER	97 OF 100	97 %	PASS
PROFICIENCY SKILLS EXAM			
VEHICLE OPERATIONS TRAINING			PASS
FIREARMS TRAINING			PASS
DEFENSIVE TACTICS TRAINING			PASS
MEDICAL TRAINING			PASS



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

April 22, 1997

Dear Ms. Watson-Dugan:

REF: APPOINTMENT CONFIRMATION

I am pleased that you have accepted our offer of appointment with the Manatee County Sheriff's Office.

You are appointed as a LAW ENFORCEMENT DEPUTY effective May 5, 1997 and you will receive a salary at the rate of \$8.99 per hour. I reserve the right however, at my discretion, to assign you to different duties or to appointment in any other division for position within the Office. In addition, you shall perform such other duties as I may from time to time at my absolute discretion, assign you or require of you.

You understand, of course, that you are to perform faithfully the duties assigned to you to the best of your ability and to my reasonable satisfaction: to devote your full and undivided time to the effective performance of your duties: to adhere to and obey all office rules and regulations; and to observe work hours/schedules, vacations and sick leave policies. You shall not at any time impart or otherwise use for any purpose, other than in connection with your employment, any confidential information that you may acquire as a result of or in connection with your employment and the performance of your duties.

You are a probationary employee for a period of one (1) year following the effective date of appointment and as such your appointment is subject to termination upon written notice without right to appeal or hearing. Your probationary period may be extended if your progress has proved to be unsatisfactory and has not reached the level required for permanent status. After your probationary period is over, your appointment may, at my discretion, be terminated if it is determined that you have neglected your duties, you are guilty of misconduct in performing your duties, or for any reason set out in your office manual. You may of course, terminate your appointment pursuant to the

procedures set forth in said manual.

Social and business functions unrelated to your appointment with this agency must be conducted in a manner as will not bring discredit upon yourself, this agency, or the Office of the Sheriff. Fighting, drunkenness, associating with known criminals, excessive traffic tickets, and similar conduct or activity may be grounds for termination. At no time are you to use your position with this Office for personal gain.

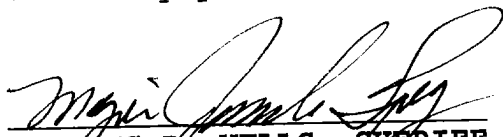
You will begin to accrue annual leave immediately upon commencing your appointment. Such leave should not be taken until completion of probation, except for extenuating circumstances. Use of such leave must be approved by your Bureau Commissioner/Branch Administrator. Terminal Separation after twelve months satisfactory continuous service is the only time at which deputies shall be paid for unused annual leave. You will accrue sick leave upon commencing your appointment and such leave will be used for your bona fide illness as noted in the Office General Orders.

If, at a later date, I discover anything in your past which would have precluded your initial appointment with this Office it may be considered grounds for termination.

Upon termination of your employment, regardless of how termination is effected, or whenever requested by me, you shall immediately return to the office supply officer all department property issued you during your appointment.

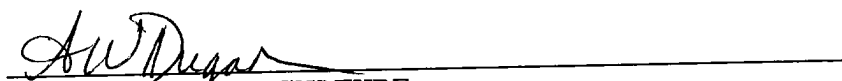
Once again, we are happy to have you with us and look forward to a long and lasting appointment relationship. If the terms above are acceptable to you, please sign and date this letter in the space provided below.

Sincerely yours,


CHARLES B. WELLS, SHERIFF
Manatee County, Florida

I, April M. Watson-Dugan, accept the terms of appointment as set forth in this letter.

DATE 5-1-97


APPOINTEE'S SIGNATURE



MANATEE COUNTY SHERIFF'S OFFICE

ADMINISTRATIVE BUREAU

NEW PERSONNEL INFORMATION SHEET



WELCOME TO THE MANATEE COUNTY SHERIFF'S OFFICE

NAME APRIL M. WATSON-DUGAN

YOUR FIRST DAY OF APPOINTMENT WILL BE 5/5/97

YOU WILL REPORT TO THE True SECTION AT 8:00 AM PM

THE CAPTAIN IS Simone YOUR SUPERVISOR IS Bill Peaslee

YOUR JOB IS ENFORCEMENT

YOUR JOB TITLE IS LAW ENFORCEMENT DEPUTY

YOUR STARTING RATE OF PAY WILL BE \$ 8.99 PER HOUR

DEPUTIES ARE PAID EVERY TWO WEEKS AND YOUR FIRST PAYDAY WILL BE 5/16/97

CHECKS ARE AVAILABLE THAT DAY: 5/16/97

AT OTHER TIMES CHECKS MAY BE PICKED UP IN THE ACCOUNTING OFFICE ON THE FIFTH FLOOR.

HEALTH BENEFITS - FULL TIME DEPUTIES ONLY

YOUR COVERAGE FOR HEALTH BENEFITS WILL BE EFFECTIVE 8/1/97

GROUP LIFE INSURANCE

PLEASE REPORT ANY ADDRESS, TELEPHONE, OR MARITAL STATUS CHANGE IMMEDIATELY TO THE PERSONNEL SECTION. THIS IS VITALLY IMPORTANT.

READ AND KEEP YOUR GENERAL ORDERS BOOK. PERSONNEL POLICIES AND BENEFITS ARE SUBJECT TO CHANGE. WHEN YOU RECEIVE CHANGE NOTICES, PLACE THEM INTO YOUR GENERAL ORDERS BOOK.

SIGNATURE OF DEPUTY AW Dugan

SIGNATURE OF INTERVIEWER Sandra M. Santos

CONDITIONS OF APPOINTMENT MANATEE COUNTY SHERIFF'S OFFICE

I, APRIL MICHELLE WATSON-DUGAN, the undersigned, have read and understand the conditions of my employment below.

1. That my selection and retention by the Manatee County Sheriff's Office is at the pleasure of the Sheriff of Manatee County.
2. That I will fully comply with all of the rules and regulations of the Manatee County Sheriff's Office.
3. That I will conduct my private affairs so as not to bring embarrassment or discredit to myself or the Manatee County Sheriff's Office.
4. That I sign this document freely and without reservation.
5. That non-compliance with any of the conditions listed above can result in termination of my appointment.

AW Dugan
Signature

4 5-1-97
Date

Sandra M. Sakas
Witness

PERSONAL INQUIRY WAIVER
Authority for Release of Information

TO: Concerned Person or
Authorized Representative of
Any Organization, Institution
or Repository of Records

APPLICANT'S NAME: April M. Watson-Dugan

DATE OF BIRTH: [REDACTED]

SOCIAL SECURITY NO.: _____

I respectfully request and authorize you to furnish the Manatee County Sheriff's Office any and all information that you may have concerning my work record, school record, military record, reputation, and financial and credit status. Please include any and all reports including all information of a confidential or privileged nature, and photostats of same, if requested. This information is to be used to assist in determining my qualifications and fitness for the position I am seeking with the Sheriff's Office.

I hereby release you, your organization or others from any liability or damage which may result from furnishing the information requested above.

[Signature]
Applicant's Signature

1-26-97
Date

City

State

Zip Code

AFFIDAVIT

STATE OF FLORIDA

COUNTY OF Hillsborough

Subscribed and sworn to (or affirmed) before me on January 26, 1997 (date) by David Torres

(name of affiant). He/She is personally known to me or has presented Florida Drivers License w-325-013-73-840-1
(type of identification) as identification.

(SEAL)

Signature David Torres, Officer Badge 844

Name David Torres,

Title NOTARY PUBLIC Officer Tampa PD,

Commission No.: _____ Expires: _____

MANATEE COUNTY SHERIFF'S OFFICE
SERVICES BRANCH
OATH OF LOYALTY

**** COUNTY OF MANATEE, FLORIDA ****

I, APRIL MICHELLE WATSON-DUGAN, a citizen
of the State of Florida and of the United States of America,
and being employed by or an officer of SHERIFF CHARLES B. WELLS
and a recipient of public funds as such employee or officer, do
hereby solemnly swear or affirm that I will support the Constitution
of the United States and of the State of Florida.

APRIL MICHELLE WATSON-DUGAN
PRINT YOUR FULL NAME

AW Dugan
SIGNATURE

05/01/97
DATE

**** NOTARY SEAL ****

Sworn to and subscribed before me this 1ST
day of MAY, 19 97.

Sandra M Sakas
Notary Public or other individual authorized to administer
oaths.

My Commission expires
FL DL#W325-013-73-840-1

OFFICIAL NOTARY SEAL
SANDRA M SAKAS
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC555424
MY COMMISSION EXP. MAY 16, 2000

MANATEE COUNTY SHERIFF'S OFFICE
SERVICES BRANCH
OATH OF OFFICE

**** COUNTY OF MANATEE, FLORIDA ****

I DO SOLEMNLY SWEAR that I will support, protect, and defend the Constitution and Government of the United States and of the State of Florida; that I am duly qualified to hold office under the Constitution of the State, and that I will well and faithfully perform the duties of DEPUTY SHERIFF on which I am now about to enter.

APRIL MICHELEE WATSON-DUGAN

PRINT NAME AS YOU DESIRE THE COMMISSION ENTERED

AW Dugan
SIGNATURE OF APPOINTEE

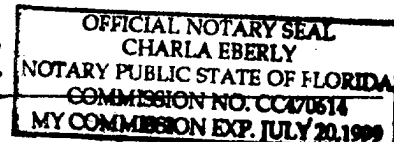
05/01/97
DATE

**** NOTARY SEAL ****

Sworn to and subscribed before me this 1ST
day of MAY, 19 97.

Charla Eberly
Notary Public or other individual authorized to administer oaths.

My Commission expires *Charla Eberly*
FL DL#W325-013-73-840-1



OATH OF OFFICE
STATE OF FLORIDA

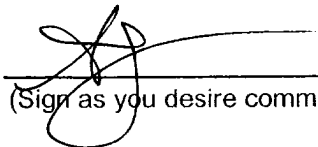
RECEIVED

JAN 21 2005

PERSONNEL SECTION

County of Manatee

I do solemnly swear (or affirm), that I will support, protect, and defend the constitution and Government of the United States and of the State of Florida; that I am duly qualified to hold office under the Constitution of the state; and that I will well and faithfully perform the duties of Deputy Sheriff on which I am now about to enter. So help me God.


(Sign as you desire commission issued)

April M. Dugan 10000486
(Print Name and ID. Number)

State of Florida
County of Manatee

Sworn to or affirmed and subscribed before me this 21 day of JANUARY
2004, by April M. Dugan.

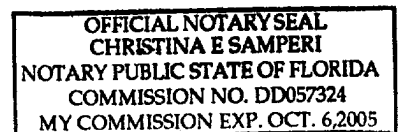
Christina E. Samperi
(Signature of Notary Public)

CHRISTINA E. SAMPERI
(Printed name of Notary)

Personally Known ☒ or

Produced Identification _____


Type of Identification _____



OATH OF OFFICE
STATE OF FLORIDA

County of Manatee


I do solemnly swear (or affirm), that I will support, protect, and defend the constitution and Government of the United States and of the State of Florida; that I am duly qualified to hold office under the Constitution of the state; and that I will well and faithfully perform the duties of Deputy Sheriff on which I am now about to enter. So help me God.


(Sign as you desire commission issued)

April M. Dugan 10000486
(Print Name and I.D. Number)

State of Florida
County of Manatee

Sworn to or affirmed and subscribed before me this 5th day of January
2005, by April M. Dugan.

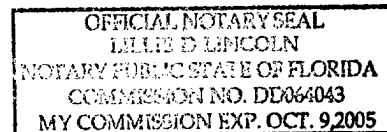

(Signature of Notary Public)

(Printed name of Notary)

Personally Known ✓ or

Produced Identification _____

Type of Identification _____





MANATEE COUNTY SHERIFF'S OFFICE
ADMINISTRATIVE BUREAU
OATH OF LOYALTY



*****COUNTY OF MANATEE, FLORIDA*****

I, April M. Dugan

a citizen of the State of Florida and of the United States of America, and being employed by
or an officer of the Manatee County Sheriff's Office and a recipient of public funds as such
employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of
the United States and of the State of Florida.

April Michelle Dugan
PRINT YOUR FULL NAME

Dep. J
SIGNATURE

4/3/07
DATE

*****NOTARY SEAL*****

Sworn to and subscribed before me this 3rd
day of April, 2007

Janet C. Loker
Notary Public or other individual authorized to administer oaths.

My Commission Expires _____



Janet C. Loker
Commission # DD318445
Expires: AUG. 20, 2008
Aaron Notary 1.800.390.5161

OATH OF OFFICE
STATE OF FLORIDA

County of Manatee

I do solemnly swear (or affirm), that I will support, protect, and defend the constitution and Government of the United States and of the State of Florida; that I am duly qualified to hold office under the Constitution of the state; and that I will well and faithfully perform the duties of Deputy Sheriff on which I am now about to enter. So help me God.

April Dugan
(Sign as you desire commission issued)

April Dugan 10000486
(Print Name and I.D. Number)

State of Florida
County of Manatee

Sworn to or affirmed and subscribed before me this 3rd day of April
2007, by April Dugan.

Janet C. Loker
(Signature of Notary Public)

Janet C. Loker
(Printed name of Notary)

Personally Known ✓ or

Produced Identification _____

Type of Identification _____

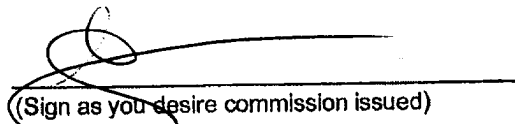


Janet C. Loker
Commission # DD318445
Expires: AUG. 20, 2008
Aaron Notary 1.800.350.5161

**OATH OF OFFICE
STATE OF FLORIDA**

County of Manatee

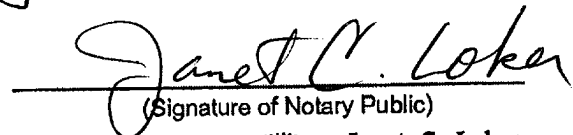
I do solemnly swear (or affirm), that I will support, protect, and defend the constitution and Government of the United States and of the State of Florida; that I am duly qualified to hold office under the Constitution of the state; and that I will well and faithfully perform the duties of Deputy Sheriff on which I am now about to enter. So help me God.


(Sign as you desire commission issued)

April Dugan 10000486
(Print Name and I.D. Number)

State of Florida
County of Manatee

Sworn to or affirmed and subscribed before me this 6th day of January
2009, by April Dugan


(Signature of Notary Public)

 Janet C. Loker
COMMISSION #DD809567
EXPIRES: AUG. 20, 2012
WWW.AARONNOTARY.com

Personally Known ☒ or

Produced Identification _____

Type of Identification _____



MANATEE COUNTY SHERIFF'S OFFICE
ADMINISTRATIVE BUREAU
OATH OF LOYALTY



*** COUNTY OF MANATEE, FLORIDA ***

I, April Dugan
a citizen of the State of Florida and of the United States of America, and being employed by
or an officer of the Manatee County Sheriff's Office and a recipient of public funds as such
employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of
the United States and of the State of Florida.

April Michelle Dugan
PRINT YOUR FULL NAME

SIGNATURE

01/06/09
DATE

*** NOTARY SEAL ***

Sworn to and subscribed before me this 6th
day of January, 2009

Janet C. Loker
Notary Public or other individual authorized to administer oaths.



Janet C. Loker
COMMISSION #DD809567
EXPIRES: AUG. 20, 2012
WWW.AARONNOTARY.com

My Commission Expires _____

OATH OF OFFICE
STATE OF FLORIDA

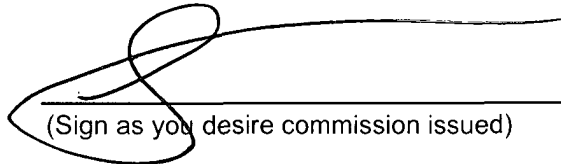
County of Manatee

I do solemnly swear (or affirm), that I will support, protect, and defend the constitution and Government of the United States and of the State of Florida; that I am duly qualified to hold office under the Constitution of the state; and that I will well and faithfully perform the duties of Deputy Sheriff on which I am now about to enter. So help me God.

RECEIVED

JAN 18 2013

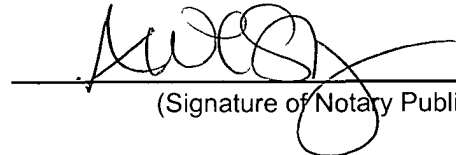
MCSO Human Resources


(Sign as you desire commission issued)

April Dugan 10000486
(Print Name and I.D. Number)

State of Florida
County of Manatee

Sworn to or affirmed and subscribed before me this January day of 2013, by April Dugan.


(Signature of Notary Public)

Personally Known ✓ or
Produced Identification _____
Type of Identification _____

(Printed name of Notary)
Amy Westberry
COMMISSION # EE 105413
EXPIRES: JUNE 21, 2015
WWW.AARONNOTARY.COM



MANATEE COUNTY SHERIFF'S OFFICE
ADMINISTRATIVE BUREAU
OATH OF LOYALTY



**** COUNTY OF MANATEE, FLORIDA ****

I, April Dugan
a citizen of the State of Florida and of the United States of America, and being employed by
or an officer of the Manatee County Sheriff's Office and a recipient of public funds as such
employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of
the United States and of the State of Florida.

April Michelle Dugan
PRINT YOUR FULL NAME
[Signature]
SIGNATURE
1/9/13
DATE

RECEIVED

JAN 18 2013

MCSO Human Resources

**** NOTARY SEAL ****

Sworn to and subscribed before me this 9
day of January, 2013

[Signature]
Notary Public or other individual authorized to administer oaths.



My Commission Expires _____



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (813) 747-3011

Fax Numbers
Criminal Investigation Division (813) 748-5682
Administrative/Executive (813) 749-5401

TO: ALL DEPUTIES
FROM: SHERIFF CHARLES B. WELLS
SUBJECT: CRIMINAL HISTORY DATA

The purpose of this memorandum is to alert all deputies to criminal history rules, regulations, and guidelines that surround our processing of any criminal data received from the Florida Crime Information Center (FCIC). This memo was prepared in connection with the audit of our computer system by the NCIC.

All deputies are instructed to read and sign as indicated below. After you digest the information contained in the attached memorandum, please sign and return the entire document to Personnel as soon as possible for placement in your personnel file. Please note that this office will assist in Federal and State investigations of any deputy of the MCSO violating NCIC/FCIC terminal security.

SIGNATURE: I have read and fully understand the contents of this memorandum relating to terminal security rules and regulations on Criminal History.

W. Dugan
DEPUTY'S SIGNATURE

5-2-97
DATE

CRIMINAL HISTORY DATA MEMO

TERMINAL SECURITY

The data stored in the Florida Crime Information Center (FCIC)/National Crime Information Center (NCIC) is documented criminal justice information and access to that data must be restricted to duly authorized criminal justice agencies. It is incumbent upon the Manatee County Sheriff's Office (MCSO) and all its deputies operating terminals which access FCIC/NCIC to afford the necessary measures to make those terminals secure from any unauthorized use. Any departure from this responsibility logically warrants disciplinary action against the offending deputy.

WHO MAY ACCESS CRIMINAL HISTORY DATA

A. Direct access, meaning the ability to access the FCIC/NCIC Computerized file by means of a terminal device, will be permitted only for criminal justice agencies in the discharge of their official, mandated responsibilities. The MCSO falls in that category. Agencies that will be permitted direct access to FCIC/NCIC criminal history data include:

1. Police forces and departments at all governmental levels that are responsible for enforcement of general criminal laws. This should be understood to include highway patrols and similar agencies.
2. Prosecutive agencies and departments at all governmental levels.
3. Courts at all governmental levels with a criminal or equivalent jurisdiction.
4. Correction departments at all governmental levels, including corrective institutions and probation departments.
5. Parole commissions and agencies at all governmental levels.
6. Agencies at all governmental levels which have as a principal function the collection and provision of fingerprint identification information.
7. State control terminal agencies which have as a sole function by statute the development and operation of a criminal justice information system.
8. Regional or local governmental organizations established pursuant to statute which have as their sole function the collection and processing of criminal justice information and whose policy and governing and boards have, as a minimum, a majority composition of members representing criminal justice agencies.

CRIMINAL HISTORY DATA MEMO (CONT'D)

USE OF SYSTEM-DERIVED CRIMINAL HISTORY DATA

A. Criminal history data on an individual from the **FCIC/NCIC** computerized file will be made available to Federal agencies authorized under Executive Order of Federal Statute and to criminal justice agencies for criminal justice purposes. **FCIC** has informed us that in Florida, this precludes the dissemination of such data for use in connection with licensing or local or state employment, other than with criminal justice agencies or for uses unless such dissemination is pursuant to Federal Statutes. State laws may not conflict with Federal Statutes.

B. The use of data for research shall acknowledge a fundamental commitment to respect individual privacy interests with the identification of subjects divorced as fully as possible from the data. Proposed programs which require information obtained from **FCIC/NCIC** must be reviewed by the **NCIC** or the Florida Department of Law Enforcement's **FCIC** (the Control Terminal Agency for our state) to assure their propriety and to determine that proper security is being provided. Therefore, all noncriminal justice agency requests involving the identities of individuals and/or their national criminal history must be forwarded to **FCIC** for submission to and review approval by the **NCIC** Advisory Policy Board. The **NCIC** or **FCIC** must retain rights to monitor any research project approved and to terminate same if a violation of the above principles is detected. Research data shall be provided off-line only.

Request for **MCSO** criminal history data by noncriminal justice agencies shall be submitted to the Sheriff, or his designee, for his approval.

C. Should any information be verified that an agency has received criminal history information and has disclosed that information to an unauthorized source, immediate action will be taken by **FCIC/NCIC** to discontinue criminal history service to that agency through the Control Terminal Agency if appropriate, until the situation is corrected.

D. Agencies should be instructed that their rights to direct access encompass only requests reasonably connected with their criminal justice responsibilities.

E. The **FBI-NCIC** will make checks, as necessary, concerning inquiries made of the system to detect possible misuses.

F. The establishing of adequate state and Federal criminal penalties for misuse of criminal history data is endorsed.

G. Detailed computerized criminal history printouts shall contain caveats to the effect, "This response based on numeric identifier only" and "Official use only arrest data based on fingerprint identification by submitting agency of **FBI**". These caveats will be generated by the **FBI-NCIC** or state control terminal's computer or may be reprinted on paper stock.

CRIMINAL HISTORY DATA MEMO (CONT'D)

COMPUTERIZED CRIMINAL HISTORIES

A. The Florida Department of Law Enforcement (FDLE) and its FCIC reserves the right to immediately suspend furnishing criminal history data, and to remove any and all FDLE equipment provided to a participating agency when either the security or dissemination requirements adopted by the FDLE are violated. The FDLE may reinstate the furnishing of data upon receipt of satisfactory assurances that such violations have been corrected.

B. All national computerized criminal history data obtained through an FCIC terminal will be subject to an audit by the General Accounting Office and the FBI.

A LOG FOR CRIMINAL HISTORY INFORMATION DISSEMINATION

A. All criminal history information which is disseminated is to be logged. Dissemination, for purposes of this memorandum, means the printing of criminal history information on paper, popularly known as "hard copy", and the transferring of that "hard copy" to an entity (another criminal justice agency/a deputy/a private individual) for official business purposes. The viewing of criminal history information on a cathode ray tube of a terminal by a deputy of the MCSO without the act of causing that information to be printed as a "hard copy" is "logged by the computer automatically" and separate handwritten log is not required. No deputy, however, shall display criminal history information on a cathode ray tube of a terminal to any person who is not a member of the criminal justice family. There are only two places within the MCSO where "hard copy" criminal history information may be obtained, i.e., the Central Booking Section and the Records Section. All "hard copies" of the criminal history data shall be obtained through the Records Section whenever the section is open. The Central Booking Section shall retain its capability for producing "hard copies" needed to fulfill the Section's responsibilities only for the Classification Deputy and the State Attorney's Office. Only in an emergency may a deputy request a "hard copy" from the Central Booking Section because the Records Section is closed. No criminal history information, except the existence of such data, shall be given over the telephone to any deputy.

MCSO shall maintain a Dissemination Log for criminal histories. A record of each "hard copy" printed in the Section shall be entered in that Section's log. When the use for this "hard copy" is completed, the copy shall be returned to the Section where it was obtained for shredding. The information on this return shall be recorded in the log. To clarify: after official use is over, under no circumstances shall a "hard copy" of a criminal history be disposed of by merely placing the data in a waste basket. It is essential for MCSO to keep a record of the distribution of this "hard copy". When authorized individual receives a criminal history "hard copy" from the Records Section or Central Booking

CRIMINAL HISTORY DATA MEMO (CONT'D)

Section of the **MCSO**, the "hard copy" shall be stamped in red which denotes that this "hard copy" has been released to the requesting individual, and that no further dissemination of this information is permitted.

Required information to be entered into the log kept by the Central Booking/Records Sections includes:

1. Data history check is made.
2. Subject's name, race, date of birth and sex on which history check made.
3. **FBI/FDLE** number
4. Individual and Agency requesting history check.
5. Reason check was made. Merely recording "For Official Criminal Justice Purposes" is insufficient as the reason.
6. Initials of the deputy releasing the history.
7. Date the criminal history is returned for shredding.
8. Signature of the individual returning the history.
9. Initials of the deputy receiving the history.



MANATEE COUNTY SHERIFF'S OFFICE

ADMINISTRATIVE BUREAU

NEW PERSONNEL CHECK LIST



TO: INDICATED COMPONENTS

FROM: Mr. Gene Leonard, Director, Personnel Section

ALLOW ME TO INTRODUCE: APRIL WATSON-DUGAN, D-86, L/E DEPUTY,

THIS PERSON HAS BEEN APPOINTED BY THE MANATEE COUNTY SHERIFF'S OFFICE. HE/SHE HAS BEEN DIRECTED TO VISIT EACH OF THE LOCATIONS LISTED BELOW. PLEASE PROVIDE THE NECESSARY DOCUMENTS, UNIFORMS, ETC., AS NEEDED FROM YOUR OFFICE, THEN INITIAL AND DATE WHEN COMPLETED. THANK YOU.

FINGERPRINT UNIT --- ROOM 200: THE FINGERPRINT UNIT WILL TAKE ELIMINATION FINGERPRINTS AND PALM PRINTS.

RF

Initial

5-1-97

Date

PURCHASING UNIT --- 401 17TH AVENUE WEST, BRADENTON, FL: THE PURCHASING UNIT WILL ISSUE THE APPROPRIATE UNIFORMS AND/OR EQUIPMENT YOU WILL NEED. YOU MAY BE ASKED TO TRY ON UNIFORMS OR BE FITTED, PENDING THE AVAILABILITY

UNIFORM TRANSACTIONS FOR NEW HIRES TAKE PLACE ON TUESDAYS AND THURSDAYS BETWEEN THE HOURS OF 0800 AND 1500..

THE PURCHASING UNIT WILL ALSO ISSUE YOUR GENERAL ORDERS MANUALS. AS YOU WERE PREVIOUSLY ADVISED, IT IS YOUR RESPONSIBILITY TO READ THE MANUAL IN ITS ENTIRETY. PLEASE DO NOT HESITATE TO CONTACT YOUR SUPERVISOR SHOULD YOU HAVE ANY QUESTIONS.

B. L. Herick

Initial

5-1-97

Date

OFF-DUTY EMPLOYMENT UNIT - ROOM 112: THE OFF-DUTY EMPLOYMENT COORDINATOR WILL ISSUE A NON-LAW ENFORCEMENT OFF DUTY EMPLOYMENT FORM THAT MUST BE COMPLETED IN ITS ENTIRETY AND SUBMITTED THROUGH YOUR CHAIN OF COMMAND SO YOU MAY CONTINUE YOUR PART-TIME

RECEIVED
MAY 06 1997
PERSONNEL SECTION

Initial

Date

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: MAJOR STEUBE
FROM: Sheriff Charles B. Wells *CBW*
DATE: 5/1/97
SUBJ: MCSO Employee Orientation Program
<ACC 33.7.2><ACC 33.7.1abc><ACC 33.5.3a>

I would like to introduce APRIL WATSON-DUGAN, a newly appointed employee assigned to your Bureau, DIST #2 Division.

He/she has been assigned to attend the mandatory one day (8 hours) MCSO Employee Orientation Program, being conducted at the MCSO Central Jail/1st floor classroom, on 6/3/97, 199__, at 0800 hrs..

Please ensure this employee's attendance as scheduled. If you have any questions, contact the Training Section at extension 2707.

CBW/ *[Signature]*

cc: Employee
Training Section
Personnel File



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



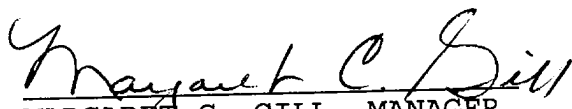
515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

May 1, 1997

This is to confirm that **APRIL WATSON-DUGAN** will be employed by the the Manatee County Sheriff's Office as a certified Law Enforcement Deputy on of May 5, 1997, and as such is qualified to carry a weapon.

CHARLES B. WELLS, SHERIFF
Manatee County, Florida


MARGARET C. GILL, MANAGER
Personnel Section

CBW/MCG/m



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

April 3, 1997


Dear Ms. Watson-Dugan:

Recently you applied for a position within the Manatee County Sheriff's Office. After careful pre-screening of your application and other information by the Employment Eligibility Board, it has been determined that your education and/or experience meet the basic requirements for this position, and as a result, your name will be placed on the eligibility list for future consideration for a period of one (1) year.

This letter is not an indication of an intent to hire. The purpose of this letter is to notify you that you are presently on our Eligibility List. This List will be applicable for a period of one (1) year from this date.

Sincerely yours,

CHARLES B. WELLS, SHERIFF
Manatee County, Florida


EUGENE A. LEONARD, DIRECTOR
Personnel Section

CBW/EAL/mg



Florida Department of
Law Enforcement

REGISTRATION FOR EMPLOYMENT AFFIDAVIT OF COMPLIANCE

Incorporated by Reference in Rule 11B-27.002(2), F.A.C.



CJSTC
60

Please type or print in black or blue ink and use capital and small letters to write names, addresses, and titles

1. Social Security Number : [REDACTED]

2. Officer's Name : Culbreath
Last

April
First MI

3. Date of birth : [REDACTED]

4. Ethnic group or race :

☐ Hispanic ☒ White ☐ Asian ☐ Other ☐ Black
☐ American Indian/Native

5. Gender/Sex : ☐ Male ☒ Female

6. Education :

☐ EQ/AA/AS ☐ BA/BS ☐ MA/MS ☐ JD/PHD/EDD

Note: To receive educational salary incentive, complete the Higher Education Report Form CJSTC-63.

7. Agency ORI : FL0410000

8. Agency Name : Manatee County Sheriff's Office

9. Employment Date : 11/02/2023

10. Is this officer employed under a Temporary Employment Authorization? If yes, complete the Temporary

☐ Yes ☒ No

11. Employment Class

☒ Law
☐ Correctional
☐ Correctional Probation
☐ Concurrent
☐ Special Elected or

Employment Type

☐ Full-Time
☒ Part-Time
☐ Auxillary

Railroad Police ☐ Full-Time ☐ Part-Time

12. If officer completed auxiliary training, does agency have proof of required high liability training on file?

Yes Date : No

13. Is this officer requesting an equivalency-of-training? If yes, maintain on file the following forms: Equivalency-of-Training form CJSTC-76 for out-of-state or Federal Officers and the Equivalency-of-Training Proficiency Demonstration form CJSTC-

☐ Yes ☒ No

14. Does the agency have the results of this officer's processed fingerprints on file? If yes, please indicate the date you received the fingerprint results from the Florida Department of Law Enforcement or the FBI.

☒ Yes Date : 10/12/2023 ☐ No

15. Does the agency have on file the seven-panel controlled substance screening results as required in Rule 11B-27.00225?

☒ Yes ☐ No

16. Has the agency completed a background investigation and have on file all documents required in Chapter 27, F.A.C.?

☒ Yes ☐ No

I hereby certify that I have collected, verified, and am maintaining on file evidence that the applicant has met the provisions of Section 943.13(1)-(8) and 943.131, F.S., or any rule adopted pursuant thereto. I fully understand that this affidavit constitutes an official statement under the purview of Section 837.06, F.S., is subject to verification by the Criminal Justice Standards and Training Commission, and any intentional false execution of this affidavit constitutes a misdemeanor of the second degree.

17. Julie Beckwith Agency
Administrator or Designee's Signature

18. 11/13/23
Date

19. Julie Beckwith HR Manager Agency
Administrator or Designee's Printed Name and Title

20. OATH

Pursuant to Section 117.05(13)(a), Florida Statutes

STATE OF FLORIDA, COUNTY OF Manatee

Sworn to (or affirmed) and subscribed before me by means of Physical Presence ☐ OR Online Notarization ☒ this 9
day of November, year 2023. By April Culbreath

Melissa Decker
Signature of Notary Public - State of Florida

Melissa Decker
Print, Type, or Stamp Commissioned name of Notary Public



Melissa Decker
Comm. HH 206227
Expires: Dec. 8, 2025
Notary Public - State of Florida

Personally Known ☒ OR Produced Identification ☐ Type of Identification Produced

An officer shall not be employed in a sworn status until all requirements of Section 943.13, F.S. have been met.

Created 1/1/1992 Original - FDLE Copy - Employing Agency
Oath amended pursuant to Section 117.05(13)(a), F.S.,

1 of 1

Commission Approved Revisions: 8/13/2020
Form Effective Date: 5/2021



Florida Department of
Law Enforcement

AFFIDAVIT OF SEPARATION

Incorporated by Reference in Rules
11B-20.001(3)(a)5.a., and 11B-27.002(3)(a)15., F.A.C.



CJSTC
61

1. Last Four Digits of Social Security Number: [REDACTED]

2. Name: Culbreath, April W

Last

First

MI

3. Agency Name: Manatee County Sheriff's Office

4. Agency ORI: FL0410000

5. Date Employed: 05/05/1997

6. Separation Date: 10/07/2023

Employment Class

- ☒ Law Enforcement
☐ Correctional
☐ Correctional Probation
☐ Concurrent
☐ Special Elected or Appointed
☐ Instructor

Employment Type

- ☒ Full Time
☐ Part Time
☐ Auxiliary

7. Separation Reasons

7A. ADMINISTRATIVE-ROUTINE

- ☒ Voluntary separation not involving misconduct
☐ Transfer within agency. No break in service
☐ Retired. Not involving misconduct
☐ Deceased
☐ Line of Duty Death
☐ Budgetary constraints. Local and Federal grants not renewed
☐ Extended leave of absence
Type: _____
Periods of Time: _____
☐ Military leave of absence
Periods of Time: _____
☐ Suspension
Periods of Time: _____
☐ Administrative separation not involving misconduct
☐ Special elected or appointed
Position: _____
Anticipated Term: _____
☐ Instructor request for change of affiliation

7B. ADMINISTRATIVE-NON-ROUTINE

- ☐ Failure to complete basic recruit training
☐ Failure to pass the State Officer Certification Examination

7C. ADMINISTRATIVE - SUBSTANDARD PERFORMANCE

- ☐ Failure to satisfactorily complete the agency fieldtraining program (training performance issues)
☐ Failure to perform assigned tasks satisfactorily.

7D. OTHER - EXAMPLE

- ☐ Excessive absenteeism, failure to report for duty, sleeping on duty, etc.

7E. UNFAVORABLE - MISCONDUCT

- ☐ Voluntary separation or retirement while being investigated for violation of agency or training school policy not involving a moral character violation defined in Rule 11B-27.0011, F.A.C.
☐ Voluntary separation or retirement in lieu of termination for violation of agency or training school policy not involving a moral character violation defined in Rule 11B-27.0011, F.A.C.
☐ Terminated for violation of agency or training school policy not involving a moral character violation defined in Rule 11B-27.0011, F.A.C.

NOTE: The agency administrator or designee shall provide written documentation of the internal or criminal investigation upon request by Commission staff.

7F. Pursuant to Section 943.1395(5), F.S., an employing agency must conduct an internal investigation when having cause to suspect that an officer or instructor it employs or employed at the time of the alleged violation, or employed on a Temporary Employment Authorization is not in compliance with Section 943.13(4) or (7), F.S., or Rule 11B-27.0011, F.A.C.

- ☐ Voluntary separation or retirement while being investigated for violation of Section 943.13(4), F.S., or violation of moral character standards defined in Rule 11B-27.0011, F.A.C.
☐ Voluntary separation or retirement in lieu of termination for violation of Section 943.13(4), F.S., or violation of moral character standards as defined in Rule 11B-27.0011, F.A.C.
☐ Terminated for violation of Section 943.13(4), F.S., or violation of moral character standards as defined in Rule 11B-27.0011, F.A.C.

NOTE: The agency administrator or designee shall provide written documentation of the internal or criminal investigation upon request by Commission staff.

NOTICE: Section 943.139(2), F.S., requires the execution of an Affidavit of Separation by the employing agency in a case of officer separation.
WARNING: Intentional false execution of this Affidavit of Separation constitutes a misdemeanor of the second degree.

8. Agency Administrator or Designee's Signature

Julie Beckwith
9. Agency Administrator or Designee's Printed Name

10/09/2023
10. Date

Human Resources Manager
11. Agency Administrator or Designee's Title

12. OATH

Pursuant to Section 117.05(13)(a), Florida Statutes

STATE OF FLORIDA, COUNTY OF Manatee

Sworn to (or affirmed) and subscribed before me by means of Physical Presence ☐ OR Online Notarization ☒ this

9

day of October, year 2023, By April Culbreath

Signature of Notary Public - State of Florida



Melissa Decker
Comm.: HH 206227
Expires: Dec. 8, 2025
Notary Public - State of Florida

Melissa Decker

Print, Type or Stamp Commissioned name of Notary Public

Personally Known

☒ OR Produced Identification

☐

Type of Identification Produced



**Employment Background
Investigative Report**

**CJSTC
77**

Please read instructions on back of this form that tell you when and how to use it. Type or print in black ink.

SSN [REDACTED] Name WATSON-DUGAN APRIL MICHELLE
(Last) (First) (MI)
Agency ORI FL0410000 Agency Name MANATEE COUNTY SHERIFF OFFICE

☒ Law Enforcement ☐ Correctional ☐ Correctional Probation ☐ Concurrent ☐ Railroad Security

RESULTS

MANDATORY CHECKS

Neighborhood
Previous Employment (see box at right)
FCIC Record
NCIC Record
Local Law Enforcement
Military History
Controlled Substances

SATISFACTORY

UNSATISFACTORY

✓
✓
✓
✓
✓
N/A
✓

CJSTC was contacted on _____
for facts/reasons applicant separated
from previous criminal justice
employments.
**MANDATORY CONTACT
WITH CJSTC FOR EACH
APPLICANT.**

RECOMMENDED

Job Related Psychological Examination
Polygraph Examination

✓
✓

NOT UTILIZED

APPLICANT ADMITS TO

☐ Having previously committed an act which constitutes a felony or misdemeanor even if previously not detected, not arrested or not prosecuted including, but not limited to, theft, possession of illegal drugs, fraud, etc.

CURRENT/RECENT ILLEGAL USE OF CONTROLLED SUBSTANCE (INDICATE TYPE AND DATE LAST USED)

☒ Marijuana 1988 ☐ Cocaine ☐ Opiates ☐ Other ☐ None
(Date) (Date) (Date) (Date)

INVESTIGATIVE FINDINGS Please describe any unsatisfactory findings, admitted acts, and other drug use below.

Rule 11B-27.0011, FAC, requires applicant's moral character be carefully examined before hiring. If the background investigation establishes that the applicant has a significant history of prior unlawful conduct, the Commission recommends not hiring the applicant.

Dante J. Ballino
Signature and Attestment of Background Investigator

Z-74

03-25-97
(Date Signed)

I hereby verify, based on the above factors considered by this agency, that the applicant is of good moral character as required by s.943.13(7), Florida Statutes.

Signature of Employing Agency Administrator or Designee (Required)

(Date Signed)



MANATEE COUNTY SHERIFF'S OFFICE

ADMINISTRATIVE BUREAU



FIREARMS TRAINING AND QUALIFICATION RECORD

DEPUTY April Watson-Dugan ID# Applicant
SS# [REDACTED] DATE 3-19-97

WEAPON
REVOLVER ☐ AUTOMATIC ☒ SHOTGUN ☐ RIFLE ☐ OTHER _____
MAKE Smith MODEL 645 SERIAL # TAT1504
ISSUED WEAPON ☐ PERSONAL WEAPON ☒ INSPECTED 3-19-97 Date PASSED YES ☒ NO ☐
CALIBER --- .38 ☐ .357 ☐ 9MM ☐ .380 ☐ 10MM ☐ .40CAL ☐ .45 ☒ 12 GAUGE ☐

FACTORY AMMO --- .38 ☐ .357 ☐ 9MM ☐ .380 ☐ 10MM ☐ .40CAL ☐ .45 ☐ 12 GAUGE ☐
RELOAD AMMO --- .38 ☐ .357 ☐ 9MM ☐ .380 ☐ 10MM ☐ .40CAL ☐ .45 ☒ 12 GAUGE ☐
REPAIRS MADE, IF ANY NONE

PURPOSE OF QUALIFICATION
MANDATORY QUALIFICATION ☐ APPLICANT ☒ OFF DUTY ☐ SECONDARY WEAPON ☐

QUALIFICATION RESULTS
SHOOTING
APPROVED QUALIFICATION COURSE # 94-05
WEAPON MALFUNCTION CAUSE, IF ANY none
PASSED - FIRST ATTEMPT ☒ FAILED - FIRST ATTEMPT ☐ PASSED - SECOND ATTEMPT ☐ FAILED - SECOND ATTEMPT ☐

QUALIFICATION RESULTS
WRITTEN TEST
PASSED - FIRST ATTEMPT ☐ FAILED - FIRST ATTEMPT ☐ PASSED - SECOND ATTEMPT ☐ FAILED - SECOND ATTEMPT ☐

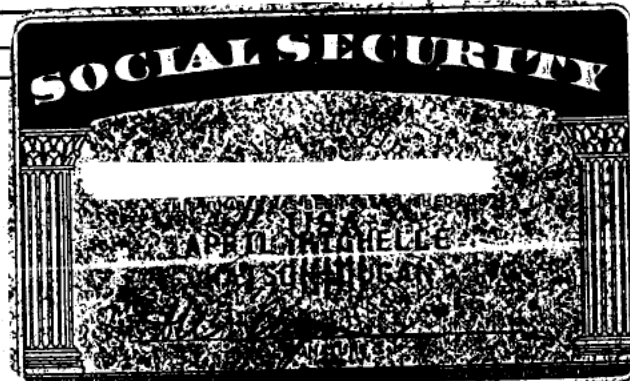
MORE TRAINING/PRACTICE NEEDED, IF ANY _____
INSTRUCTOR Chad M. Hill PRACTICE AMMUNITION ISSUED YES ☒ NO ☐
DATE AND # HOURS OF TRAINING/QUALIFICATION/REMEDIATION 3-19-97

TYPE OR PRINT IN INK

FLORIDA RETIREMENT SYSTEM
PERSONAL HISTORY RECORD

INSTRUCTIONS ON BACK

FRS USE ONLY Batch Number Effective Date Plan Pos. Data



TO BE COMPLETED BY EMPLOYEE

SOCIAL SECURITY NUMBER [REDACTED] DATE OF BIRTH [REDACTED] SEX F
 LAST NAME FIRST MIDDLE NAME
 WATSON-DUGAN APRIL MICHELLE
 PRIOR NAME FIRST MIDDLE NAME

DESIGNATION OF BENEFICIARIES - COMPLETE ONLY SECTION 1, 2, OR 3

REEMPLOYED RETIREES - Completion of this section will not change the beneficiary on your retired account. This beneficiary designation is for your renewed membership under FRS only. Obtain Form FST-12 from the Division of Retirement if you wish to change the beneficiary on your retired account.

1. ☒ I CHOOSE TO HAVE BENEFITS PAID IN ACCORDANCE WITH 121.091(8), F.S., AS FOLLOWS:

FRS MEMBERS ONLY - If you die before you retire and you have not designated a beneficiary, Section 121.091(8), Florida Statutes, will cause any benefits from your account to be paid as follows: 1st to your spouse, 2nd to your living children (equally), 3rd to your parents (equally) and 4th to the legal representative of your estate (See reverse side.) If you do not want your benefits paid in this manner in the event of your death, complete either Section 2 or 3.

TRS & SCOERS MEMBERS - You must name a beneficiary either sequentially or jointly.

OR

2. ☐ **SEQUENTIALLY** (IN ORDER NAMED) - DO NOT LIST A BENEFICIARY HERE IF ABOVE SECTION IS COMPLETED BENEFITS WILL BE PAID TO THE FIRST NAMED BENEFICIARY.

Primary Beneficiary	Relationship	Date of Birth	Sex
First Contingent Beneficiary	Relationship	Date of Birth	Sex
Second Contingent Beneficiary	Relationship	Date of Birth	Sex

OR

3. ☐ **JOINTLY** - BENEFITS SHALL BE DIVIDED AND PAYABLE AS INDICATED BELOW (PERCENTAGES SHOULD TOTAL 100%).

Primary Beneficiary	Relationship	Date of Birth	Sex	%
Primary Beneficiary	Relationship	Date of Birth	Sex	%
Primary Beneficiary	Relationship	Date of Birth	Sex	%

IF THE ABOVE DOES NOT MEET YOUR NEEDS, ATTACH A SIGNED AND DATED LISTING OF YOUR DESIGNATED BENEFICIARIES

W. Dugan
 EMPLOYEE'S SIGNATURE

5-1-97
 DATE

TO BE COMPLETED BY EMPLOYER

MANATEE CO. SHERIFF'S OFC
 NAME OF EMPLOYING AGENCY

51-006
 REPORTING UNIT NO.

LAW ENFORCEMENT DEPUTY
 POSITION TITLE OF EMPLOYEE

05/05/97

DATE OF THIS EMPLOYMENT
 HB

FRS PLAN

REGULAR ELECTED STATE & COUNTY
 XX SPECIAL RISK SPECIAL RISK ADMIN. SUPP.
 SENIOR MGMT. SERVICE (POSITION NUMBER)

REEMPLOYED RETIREES

REGULAR
 ESCOC
 OTHER
 SCOERS
 TRS

STATE CLASS CODE

REASON FOR SUBMITTING

XXX ENROLLMENT
 BENEFICIARY CHANGE
 PLAN CHANGE
 NAME CHANGE
 OTHER

FLORIDA RETIREMENT SYSTEM RECEIVED MAY 08 1997
APPLICATION FOR SPECIAL RISK MEMBERSHIP
(Complete in Duplicate Form)
APRIL MICHELLE

WATSON-DUGAN

(Member's Name)	Last	First	Middle
LAW ENFORCEMENT DEPUTY'S OFFICE			
Social Security No.	Date of Birth	Position Title	
05/05/97		MANATEE COUNTY SHERIFF'S OFFICE	
Date Employed In Position	Agency Name	County/Agency No.	
		51-006	

I hereby make application for Special Risk Membership as a member of the Florida Retirement System meeting the criteria for special risk as indicated below:

- A. I am a Law Enforcement Officer certified, or required to be certified, by Criminal Justice Standards and Training Commission; and
- ☒ My duties and responsibilities in this position include the pursuit, apprehension and arrest of law violators or suspected law violators; or
- ☐ I am an active member of a bomb disposal unit whose primary responsibility is the location, handling and disposal of explosive devices; or
- ☐ I am the Supervisor or Command Officer of special risk members whose duties include the pursuit, apprehension and arrest of law violators or suspected law violators; or
- ☐ I am the Supervisor or Command Officer of special risk members of a bomb disposal unit; or
- ☐ I am a County Sheriff or Elected Police Chief.
- B. I am a Correctional Officer certified, or required to be certified, by Criminal Justice Standards and Training Commission; and
- ☐ My primary duties and responsibilities in this position are the custody and physical restraint, when necessary, of prisoners or inmates within a prison, jail or other criminal detention facility, or while on work detail outside the facility, or while being transported; or
- ☐ I am the Supervisor or Command Officer of special risk members whose primary duties and responsibilities are the custody and physical restraint of prisoners and inmates within a prison, jail or other criminal detention facility.
- ☐ I am the Superintendent or Assistant Superintendent of a Correctional or Detention Facility.
- C. I am a Firefighter certified, or required to be certified, by the Bureau of Fire and Training; and
- ☐ My duties and responsibilities in this position include on the scene fighting of fires; or
- ☐ I am the Supervisor or Command Officer of special risk members whose duties include on the scene fighting of fires.

Her Dugan

Signature of Employee

5-1-97

Date Signed

TO BE COMPLETED BY EMPLOYER

I hereby certify that the position of APRIL MICHELLE WATSON-DUGAN
(Name of Employee)

meets the criteria for special risk membership in accordance with Section 121.0515, Florida Statutes, and Florida Retirement System Rules, and he/she is certified, or required to be certified, in compliance with Section 943.1395 or Section 633.35, Florida Statutes. Attached is a current job description showing all of his/her duties and the percentage of time spent performing each of these duties.

Charles B. White

Signature of Employer

SHERIFF

Position Title

5/1/97

Date

TO BE COMPLETED BY DIVISION OF RETIREMENT

Certification of the above officer or employee as a Special Risk Member is hereby

APPROVED Sarah Beth Snuggs

Approved

Authorized Signature

5/5/97
Effective Date of Special Risk

Disapproved

Authorized Signature

Effective Date of Special Risk

FLORIDA RETIREMENT SYSTEM
PERSONAL HISTORY RECORD

FRS USE ONLY	Effective Date	Plan	Pos. Data	SSN VERIFICATION
Batch Number				

TO BE COMPLETED BY EMPLOYEE

SOCIAL SECURITY NUMBER [REDACTED] DATE OF BIRTH (MM-DD-YY) [REDACTED] SEX F

TAPE COPY OF
SOCIAL SECURITY CARD HERE

LAST NAME WATSON FIRST APRIL MIDDLE NAME MICHELLE
PRIOR NAME WATSON-DUGAN FIRST APRIL MIDDLE NAME MICHELLE

DESIGNATION OF BENEFICIARIES - COMPLETE ONLY SECTION 1, 2, OR 3

REEMPLOYED RETIREES - Completion of this section will not change the beneficiary on your retired account. This beneficiary designation is for your renewed membership under FRS only. Obtain Form FST-12 from the Division of Retirement if you wish to change the beneficiary on your retired account. Only a beneficiary who qualifies as joint annuitant will be eligible for a monthly benefit upon your death. (See reverse side).

1. ☒ I CHOOSE TO HAVE BENEFITS PAID IN ACCORDANCE WITH 121.091(8), F.S., AS FOLLOWS:

FRS MEMBERS ONLY - Benefits from your account to be paid: 1st to your spouse, 2nd to your living children (equally), 3rd to your parents (equally), and 4th to the legal representative of your estate (see reverse side). If you are not survived by a spouse, the names of your survivors must be documented by court order. If you do not want your benefits paid in this manner in the event of your death, complete either Section 2 or 3.

TRS & SCOERS MEMBERS - You must name a beneficiary either Sequentially or Jointly.

OR

2. ☐ **SEQUENTIALLY** (IN ORDER NAMED) - DO NOT LIST A BENEFICIARY HERE IF ABOVE SECTION IS COMPLETED. BENEFITS WILL BE PAID TO THE FIRST NAMED BENEFICIARY.

Primary Beneficiary	Relationship	Date of Birth	Sex
First Contingent Beneficiary	Relationship	Date of Birth	Sex
Second Contingent Beneficiary	Relationship	Date of Birth	Sex

OR

3. ☐ **JOINTLY** - BENEFITS SHALL BE DIVIDED AND PAYABLE AS INDICATED BELOW (PERCENTAGES SHOULD TOTAL 100%).

Primary Beneficiary	Relationship	Date of Birth	Sex	%
Primary Beneficiary	Relationship	Date of Birth	Sex	%
Primary Beneficiary	Relationship	Date of Birth	Sex	%

IF THE ABOVE DOES NOT MEET YOUR NEEDS, IN ABOVE FORMAT, ATTACH A SIGNED AND DATED LISTING OF YOUR DESIGNATED BENEFICIARIES.

EMPLOYEE'S SIGNATURE

DATE

TO BE COMPLETED BY EMPLOYER

NAME OF EMPLOYING AGENCY <u>MANATEE CO SHERIFF'S OFC</u>	REPORTING UNIT NUMBER <u>51-006</u>	DATE OF THIS EMPLOYMENT <u>05-05-97</u>
POSITION TITLE OF EMPLOYEE <u>LAW ENFORCEMENT DEPUTY</u>	STATE CLASS CODE <u>HB</u>	
FRS PLAN REGULAR ESCOC <u>XXX</u> SPECIAL RISK SPECIAL RISK ADMIN. SUPP. SENIOR MGMT. SERVICE (POSITION NO.)		
REEMPLOYED RETIREES REGULAR ESCOC SENIOR MGMT. SERVICE (POSITION NO.)		OTHER TRS SCOERS
REASON FOR SUBMITTING ENROLLMENT <u>XXX</u> NAME CHANGE PLAN CHANGE BENEFICIARY CHANGE OTHER		

FLORIDA RETIREMENT SYSTEM
PERSONAL HISTORY RECORD

FRS USE ONLY

Batch Number

Effective Date

Plan

Pos. Data

SSN VERIFICATION

TO BE COMPLETED BY EMPLOYEE

SOCIAL SECURITY NUMBER

DATE OF BIRTH (MM-DD-YY)

SEX

TAPE COPY OF
SOCIAL SECURITY CARD HERE

WATSON

APRIL

MICHELLE

LAST NAME

FIRST

MIDDLE NAME

WATSON-DUGAN

APRIL

MICHELLE

PRIOR NAME

FIRST

MIDDLE NAME

DESIGNATION OF BENEFICIARIES - COMPLETE ONLY SECTION 1, 2, OR 3

REEMPLOYED RETIREES - Completion of this section will not change the beneficiary on your retired account. This beneficiary designation is for your renewed membership under FRS only. Obtain Form FST-12 from the Division of Retirement if you wish to change the beneficiary on your retired account. Only a beneficiary who qualifies as joint annuitant will be eligible for a monthly benefit upon your death. (See reverse side).

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TRS & SCOERS MEMBERS - You must name a beneficiary either Sequentially or Jointly.

OR

2. ☐ **SEQUENTIALLY** (IN ORDER NAMED) - DO NOT LIST A BENEFICIARY HERE IF ABOVE SECTION IS COMPLETED. BENEFITS WILL BE PAID TO THE FIRST NAMED BENEFICIARY.

Primary Beneficiary

Relationship

Date of Birth

Sex

First Contingent Beneficiary

Relationship

Date of Birth

Sex

Second Contingent Beneficiary

Relationship

Date of Birth

Sex

OR

3. ☐ **JOINTLY** - BENEFITS SHALL BE DIVIDED AND PAYABLE AS INDICATED BELOW (PERCENTAGES SHOULD TOTAL 100%).

Primary Beneficiary

Relationship

Date of Birth

Sex

%

Primary Beneficiary

Relationship

Date of Birth

Sex

%

Primary Beneficiary

Relationship

Date of Birth

Sex

%

IF THE ABOVE DOES NOT MEET YOUR NEEDS, IN ABOVE FORMAT, ATTACH A SIGNED AND DATED LISTING OF YOUR DESIGNATED BENEFICIARIES.

EMPLOYEE'S SIGNATURE

DATE

TO BE COMPLETED BY EMPLOYER

MANITOWOC CO SHERIFF'S OFC

51-006

05-05-97

NAME OF EMPLOYING AGENCY

REPORTING UNIT NUMBER

DATE OF THIS EMPLOYMENT

ENFORCEMENT DEPUTY

POSITION TITLE OF EMPLOYEE

STATE CLASS CODE

FRS PLAN

REGULAR

ESCOC

XXX

SPECIAL RISK

SPECIAL RISK ADMIN. SUPP.

SENIOR MGMT. SERVICE (POSITION NO.)

REEMPLOYED RETIREES

REGULAR

ESCOC

SENIOR MGMT. SERVICE (POSITION NO.)

OTHER

TRS

SCOERS

REASON FOR SUBMITTING

ENROLLMENT

XXX

NAME CHANGE

PLAN CHANGE

BENEFICIARY CHANGE

OTHER

GENERAL INSTRUCTIONS

UNDER THE FOLLOWING GUIDELINES, A PERSONAL HISTORY RECORD (FRS-M10) SHOULD BE SUBMITTED FOR AN EMPLOYEE:

- If the employee has never participated in the Florida Retirement System, or
- If the employee, when last employed by a public entity, was a member of a plan other than the FRS regular plan "HA", or
- If the employee, when last employed by a public entity, was a member of the FRS regular plan "HA", has had a name change or beneficiary change, or
- If a current employee has a name, beneficiary, plan change, or social security number change.

UNDER THE FOLLOWING GUIDELINES, A PERSONAL HISTORY RECORD (FORM FRS-M10) SHOULD NOT BE SUBMITTED FOR AN EMPLOYEE:

- If the employee has been and will continue to be a member of the FRS regular plan "HA" and the member does not want to change his/her current beneficiary designation on file with the Division.

After the Personal History Record has been completed, distribution should be made **IMMEDIATELY** as follows: original should be mailed to the Division of Retirement; first copy should be retained by the employer and placed in the employee's file; second copy should be given to the employee.

TO BE COMPLETED BY EMPLOYEE

SOCIAL SECURITY NUMBER: Enter your social security number. Example: 123-45-6789. Your retirement account is controlled by your social security number.

DATE OF BIRTH: Enter all dates as month, day, and year. Example: May 8, 1939 would be entered as 05/08/39.

SEX: Enter "M" for male or "F" for female.

SOCIAL SECURITY CARD: Tape a copy of your correct social security card. The number in the social security number space and the number on the social security card must be the same.

NAME: Enter your last name, first name, middle initial, in this order. If your name includes Jr., Sr., II, etc., enter this after last name. Example: John Paul Smith, Jr., would read "Smith Jr., John P".

PRIOR NAME: If you have had any employment or creditable service listed under any name other than the one reported above, enter this last prior name.

DESIGNATION OF BENEFICIARY

FRS ONLY: Section 121.091(8), Florida Statutes, provides: "Each member may, on a form provided for that purpose, signed and filed with the Division, designate a choice of one or more persons, named sequentially or jointly, as his or her beneficiary who shall receive the benefits, if any, which may be payable in the event of the member's death pursuant to the provisions of this chapter. If no beneficiary is named in the manner provided above, or if no beneficiary designated by the member survives the member, the beneficiary shall be the spouse of the deceased, if living. If the member's spouse is not alive at his or her death, the beneficiary shall be the living children of the member. If no children survive, the beneficiary shall be the member's father or mother, if living; otherwise, the beneficiary shall be the member's estate."

If your designated beneficiary does not qualify as a joint annuitant, only a refund of any contributions you made to the system will be paid at your death. Only a joint annuitant will be eligible to receive monthly benefits from your retirement account. A joint annuitant is your spouse; your natural or legally adopted child who is either under age 25 or is physically or mentally disabled and incapable of self-support (regardless of age); or your parent, grandparent, or a person for whom you are the legal guardian, provided such parent, grandparent, or person received one-half or more of their financial support from you or is eligible to be claimed as a dependent on your federal income tax return.

TRS or SCOERS MEMBERS: You must name a beneficiary to receive, sequentially or jointly, any benefits that may be payable upon your death prior to retirement. You may name as your beneficiary any person, organization, your estate or trust, but only your spouse is eligible to receive a monthly benefit if you die prior to your actual retirement after completing 10 years of creditable service.

You should keep your beneficiary designations current at all times. Upon your death, the Division will pay any benefits to the designated beneficiary on file in the Division of Retirement. Any questions on designating beneficiaries should be directed to the Division by writing: Division of Retirement, Cedars Executive Center, Bldg. C, 2639 N. Monroe Street, Tallahassee, FL 32399-1560 or by calling 850/488-5207, SUNCOM 278-5207, ATTN: Survivor Benefits Section.

TO BE COMPLETED BY EMPLOYER

NAME OF EMPLOYING AGENCY: Enter the complete name of the employing agency or department. Example: Leon Co. School Board, or City of Perry, or Leon County Tax Collector.

REPORTING UNIT NUMBER: Enter the 5-digit number assigned to your agency.

POSITION TITLE OF EMPLOYEE: Enter the correct and complete position title of this employee.

STATE CLASS CODE: All state agencies enter the appropriate class code for employee's position.

DATE OF THIS EMPLOYMENT: Enter the beginning date of the present employment in a regularly established position.

FRS PLAN: Enter an "X" for the appropriate plan for the member. If "Other", please explain. If enrolling employee in the SMSC, include the employee's position number.

POSITION NUMBER: Enter numeric (up to 10 digits) position number for Senior Management Position.

REASONS FOR SUBMITTING THIS FORM: Enter an "X" as appropriate. If "Other" is marked, explain specific change being reported.

Florida Retirement System Pension Plan
Deferred Retirement Option Program (DROP)
Termination Notification



PO BOX 9000 Tallahassee, FL 32315-9000
Local Phone: 850-907-6500 Toll Free: 844-377-1888 FAX: 850-410-2010

Member Verification:

Member Name: **APRIL ALLISON CULBREATH**

Member SSN: [REDACTED]

Mailing Address: [REDACTED]

Home Telephone Number: [REDACTED]

According to our records, your DROP termination date is **10/07/2023**. You must terminate all Florida Retirement System (FRS) employment to receive your accumulated DROP benefits and begin your monthly retirement benefits. You and your employer's authorized representative must complete this form certifying your DROP employment termination.

Termination Requirement:

In order to satisfy your employment termination requirement, you must terminate all employment relationships with all participating FRS employers for the first 6 calendar months after your DROP termination date. Termination requirement means you cannot remain employed or become employed with any FRS covered employer in a position covered or non-covered by retirement for the first 6 calendar months following your DROP termination date. This includes but is not limited to: part-time work, temporary work, other personal services (OPS), substitute teaching, adjunct professor or non-Division approved contractual services.

Reemployment Limitation:

You may return to work for a participating FRS employer during the 7th - 12th calendar months following your DROP termination date, but your monthly retirement benefit will be suspended for those months you are employed. Exceptions for FRS retirees are outlined in Section 121.091(9) F.S. There are no reemployment limitations after the 12th calendar month following your DROP termination date.

If you fail to meet the termination requirement, you will void (cancel) your retirement and DROP participation and you must repay all retirement benefits received (including accumulated DROP benefits). If you void your retirement, your employer will be responsible for making retroactive retirement contributions and you will be awarded service credit for the period during which you were in DROP through your new employment termination date. You must apply to establish a future retirement date. Your eligibility for DROP participation will be determined by your future retirement date and you may lose your eligibility to participate in DROP.

This is to acknowledge that I will terminate or have terminated employment with my FRS employer on 10/7/2023.

This further acknowledges that I have read and understand the above statements.

Member Signature: (sign in the presence of a Notary) _____

Notary:

State of Florida, County of Manatee. The above named person who has sworn to and subscribed before me this 10 day of December 20 23 and who is personally known ✓ or has produced



Ashley Burton identification.
Comm.: HH 210109
Expires: Dec. 21, 2025
Notary Public - State of Florida

Signature of Notary Public

Print, Type or Stamp Commissioned Name of Notary Public

Employer Certification of Employment Termination:

This is to certify that the DROP participation for the above named member will terminate or has terminated on 10/7/23 with the Agency, who I am authorized to represent.

(Date)

Authorized Signature: _____

Print Name: ASHLEY BURTON

Agency Name: Manatee County Sheriff's Office

Position Title: HR Director

Phone Number: 941 747 3011

Agency# 510000 Date: 12/6/2023

Florida Retirement System Pension Plan
Application for Service Retirement and the
Deferred Retirement Option Program (DROP)



PO BOX 9000 Tallahassee, FL 32315-9000
Local Phone: 850-907-6500 Toll Free: 844-377-1888 FAX: 850-410-2010

Member Name April Watson Culbreath Member SSN [REDACTED]
Position Title Law Enforcement Detective Birth Date [REDACTED]
Home Phone [REDACTED] Work Phone (941) 747-3011
Home Mailing Address [REDACTED] Present FRS Employer(s) Manatee County Sheriff's Office
Email AprilnCora@gmail.com

I have resigned my employment on the date stated below and elect to participate in the DROP in accordance with s. 121.091(13), Florida Statutes (F.S.). My DROP participation cannot exceed a maximum of 60 months from the date I first reach my normal retirement date as determined by the Division of Retirement.

I understand I must terminate all employment with FRS employers to receive a monthly retirement benefit and my DROP benefit under Chapter 121, F. S. If I fail to terminate my employment in accordance with s. 121.021(39)(b), F.S., on my DROP termination date, my retirement will be null and void and my FRS membership shall be established retroactively to the date I began DROP. Termination requirements for elected officials are different as specified in s 121.091(13)(b)(4), F.S. Participation in the DROP does not guarantee my employment for the DROP period. I cannot add service, change options, change my type of retirement or elect the Investment Plan after the DROP begin date. I have read and understand the DROP Accrual Distribution information provided with this form.

Beneficiary Designation: All previous beneficiary designations are null and void. To designate more than one primary beneficiary, attach a Beneficiary Designation Form, FST-12.

Primary		Contingent	
Name	<u>[REDACTED]</u>	Name	<u>Jennifer Ann Smith</u>
SSN	<u>[REDACTED]</u>	SSN	<u>[REDACTED]</u>
Phone	<u>[REDACTED]</u>	Phone	<u>(813) 727-1497</u>
Address	<u>[REDACTED]</u>	Address	<u>10305 N Armenia Ave Tampa, FL 33612</u>
Relation <u>daughter</u>		Relation <u>Sister</u>	
DOB <u>[REDACTED]</u>		DOB <u>[REDACTED]</u>	

DROP begin date: 05/01/ 2022 DROP termination and resignation date 4/30/2027

Member Signature: (sign in the presence of a Notary) [Signature]

Notary: State of FL, County of Manatee. The above named person who has sworn to and subscribed before me this 4th day of April 20 22 and is personally known or has produced as identification

Olwin Wischer

Signature of Notary Public



Olwin Wischer
Comm.: HH 203675
Expires: Nov. 30, 2025
Notary Public - State of Florida

Print, Type or Stamp Commissioned Name of Notary Public

Employer Certification: This is to certify that the above named member will be enrolled as a DROP Participant on the date stated and will terminate his or her employment on the date stated.

For educational agencies only: I certify that the member's position of _____ meets the definition of instructional personnel under Section 1012.01(2), Florida Statutes.

Authorized Personnel Signature: Lore Landicinia-Miller Agency Number: 51006
Agency Phone: 941-747-3011 Date: 4/5/2022

**Florida Retirement System Pension Plan
Notice of Election to Participate in the Deferred Retirement Option
Program (DROP) and Resignation of Employment**



PO BOX 9000 Tallahassee, FL 32315-9000
Local Phone: 850-907-6500 Toll Free: 844-377-1888 FAX: 850-410-2010

Member Name April Watson Culbreath
Position Title Law Enforcement Detective
Home Phone [REDACTED]
Home Mailing Address [REDACTED]

Member SSN [REDACTED]
Birth Date [REDACTED]
Work Phone 941-747-3011 x 2504
Present FRS Employer(s) Manatee County Sheriff's Office

Resignation From Employment to Participate in the DROP:

I elect to participate in the DROP in accordance with s 121.091(13), Florida Statutes (F.S.), as indicated below, and resign my employment on the date I terminate from the DROP. I understand that the earliest date my participation in the DROP can begin is the first date I reach normal retirement date as determined by law and that my DROP participation cannot exceed a maximum of 60 months from the date I reach my normal retirement date, although I may elect to participate for less than 60 months. Participation in the DROP does not guarantee my employment for the DROP period.

I understand that I must terminate all employment with FRS employers to receive a monthly retirement benefit and my DROP benefit under Chapter 121, F. S. Termination requirements for elected officers are different as specified in s.121.091(13)(b)4., F. S. I cannot add service, change options, change my type of retirement or elect the Investment Plan after my DROP begin date. I have read and understand the DROP Accrual and Distribution information provided with this form.

DROP begin date: 05 /01/ 2022 DROP termination and resignation date: 04/30/2027

Member Signature: (sign in the presence of a Notary)

[Signature]

Notary: State of FL, County of Manatee. The above named person who has sworn to and subscribed before me this 4th day of April 20 22 and is personally known [Signature] or has produced

as identification

[Signature]

Signature of Notary Public



Olwin Wischer
Comm.: HH 203675
Expires: Nov. 30, 2025
Notary Public - State of Florida

Print, Type or Stamp Commissioned Name of Notary Public

Employer Certification: This is to certify that the above named member will be enrolled as a DROP Participant on the date stated and will terminate his or her employment on the date stated.

For educational agencies only: I certify that the member's position of _____ meets the definition of instructional personnel under Section 1012.01(2) Florida Statutes.

Authorized Personnel Signature: [Signature]

Agency Number 51006

Agency Phone: 941-747-3011

Date 4/5/2022

Florida Retirement System Pension Plan
Option Selection for FRS Members

PO BOX 9000 Tallahassee, FL 32315-9000
Local Phone: 850-907-6500 Toll Free: 844-377-1888 FAX: 850-410-2010



Member Name April Watson Culbreath

Member SSN [REDACTED]

A member must select one of the following retirement options prior to receipt of their first monthly retirement benefit.

I select:

☒ Option 1: A monthly benefit payable for my lifetime. Upon my death the monthly benefit will stop and my beneficiary will receive only a refund of any contributions I have paid which are in excess of the amount I have received in benefits. This option does not provide a continuing benefit to my beneficiary.

☐ Option 2: A reduced monthly benefit payable for my lifetime. If I die within a period of ten years after my retirement date, my designated beneficiary will receive a monthly benefit in the same amount as I was receiving for the balance of the 10-year period. No further benefits are then payable.

☐ Option 3: A reduced monthly benefit payable for my lifetime. Upon my death, my joint annuitant, if living, will receive a lifetime monthly benefit payment in the same amount as I was receiving. (Exception: The benefit paid to a joint annuitant under age 25, who is not your spouse, will be your option one benefit amount. The benefit will stop when your joint annuitant reaches age 25, unless disabled and incapable of self-support, in which case the benefit will continue for the duration of the disability.) No further benefits are payable after both my joint annuitant and I are deceased.

The social security number of my joint annuitant is _____.

☐ Option 4: An adjusted monthly benefit payable to me while both my joint annuitant and I are living. Upon the death of **either my joint annuitant or me**, the monthly benefit payable to the surviving person (my joint annuitant or me) **is reduced to two-thirds** of the monthly benefit payable while we were both living. (Exception: The benefit paid to a joint annuitant under age 25, who is not your spouse, will be your option one benefit amount. The benefit will stop when your joint annuitant reaches age 25, unless disabled and incapable of self-support, in which case the benefit will continue for the duration of the disability.) No further benefits are payable after both my joint annuitant and I are deceased.

The social security number of my joint annuitant is _____.

COMPLETE AND RETURN FORM SA-1

I understand I must terminate all employment with FRS employers to receive a retirement benefit under Chapter 121, Florida Statutes. I also understand that I **cannot** add service, change options or change my type of retirement (Regular, Disability or Early) once my retirement becomes final. My retirement becomes final when any benefit payment is cashed, deposited or when my Deferred Retirement Option Program (DROP) participation begins.

Member Signature: (sign in the presence of a Notary)

Notary: State of Florida, County of Manatee. The above named person who has sworn to and subscribed before me this 4th day of April 2022 and is personally known _____ or has produced _____ as identification.

Olwin Wischer
Signature of Notary Public



Olwin Wischer
Comm.: HH 203675
Expires: Nov. 30, 2025
Notary Public - State of Florida

Print, Type or Stamp Commissioned Name of Notary Public

Florida Retirement System Pension Plan
Spousal Acknowledgment Form

PO BOX 9000 Tallahassee, FL 32315-9000
Local Phone: 850-907-6500 Toll Free: 844-377-1888 FAX: 850-410-2010



Member Name: April Culbreath

Member SSN: [REDACTED]

CHECK ONE OF THE FOLLOWING:

MARRIED: ☒ YES ☐ NO

IF YES AND YOU SELECTED OPTION 1 OR 2,
YOUR SPOUSE MUST ALSO COMPLETE BOX 2.

Notarized Signature of Member: April Watson Culbreath

1 Notary: State of Florida, County of Manatee. The above named person who has sworn to and
subscribed before me this 4TH day of April 2022 and is personally known Olwin Wischer or
produced _____ as identification.

Olwin Wischer
Signature of Notary Public - State of Florida


Print, Type or Stamp Commissioned Name of Notary Public

SPOUSAL ACKNOWLEDGMENT [REDACTED]


being the spouse of the above named

member, acknowledge that the member has selected either Option 1 or 2.

Notarized Signature of Spouse: [REDACTED]

2 Notary: State of Florida, County of Manatee. The above named person who has sworn to and
subscribed before me this 4TH day of April 2022 and is personally known Olwin Wischer or
produced _____ as identification.

Olwin Wischer
Signature of Notary Public - State of Florida


Print, Type or Stamp Commissioned Name of Notary Public

The following is an explanation of all four Florida Retirement System Options:

- Option 1: A monthly benefit payable for my lifetime. Upon my death, the monthly benefit will stop and my beneficiary will receive only a refund of any contributions I have paid which are in excess of the amount I have received in benefits. This option does not provide a continuing benefit to my beneficiary.
- Option 2: A reduced monthly benefit payable for my lifetime. If I die within a period of ten years after my retirement date, my designated beneficiary will receive a monthly benefit in the same amount as I was receiving for the balance of the 10-year period. No further benefits are then payable.
- Option 3: A reduced monthly benefit payable for my lifetime. Upon my death, my joint annuitant, if living, will receive a lifetime monthly benefit payable in the same amount as I was receiving. (Exception: The benefit paid to a joint annuitant under age 25, who is not your spouse, will be your option one benefit amount. The benefit will stop when your joint annuitant reaches age 25, unless disabled and incapable of self-support, in which case the benefit will continue for the duration of the disability.) No further benefits are payable after both my joint annuitant and I are deceased.
- Option 4: An adjusted monthly benefit payable to me while both my joint annuitant and I are living. Upon the death of either my joint annuitant or me, the monthly benefit payable to the survivor is reduced to two-thirds of the monthly benefit received when both were living. (Exception: The benefit paid to the joint annuitant under age 25, who is not your spouse, will be your option one benefit amount. The benefit will stop when your joint annuitant reaches age 25, unless disabled and incapable of self-support, in which case the benefit will continue for the duration of the disability.) No further benefits are payable after both my joint annuitant and I are deceased.

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

To: Fiscal

From: Carol Laudicina
Human Resources Director



Date: April 5, 2022

Subject: Retirement

Employee: April Culbreath

Effective date of retirement: 05/01/2022


Type of retirement: ☐ Regular Pension

☐ Investment

☒ DROP

☐ Accruals to be paid at BEGINNING of DROP

☒ Accruals to be paid at END of DROP


Employee Signature – ID # 10000486

For payroll purposes only:

☐ Complete final salary certification (FC-1)

/crl

Cc: Personnel File

DP-PAYT
12/16
DROP Term/Refund

FLORIDA RETIREMENT SYSTEM PENSION PLAN
Deferred Retirement Option Program (DROP)
Selected Payout Method



PO BOX 9000 Tallahassee, FL 32315-9000
Local Phone: 850-907-6500 Toll Free: 844-377-1888 FAX: 850-410-2010

MEMBER NAME: APRIL ALLISON CULBREATH

MEMBER SSN: [REDACTED]

PAYEE NAME: APRIL ALLISON CULBREATH

PAYEE SSN: [REDACTED]

This form serves as an affirmation of your selected payout method for your DROP accumulation as provided in § 121.091, Florida Statutes. The payout method may have serious tax implications. Before making your payout election, please read the enclosed Special Tax Notice. You may also want to consult a tax professional regarding tax implications.

DROP BALANCE PAYOUT METHOD

If you are subject to a Required Minimum Distribution (RMD), or made after-tax contributions, those amounts will be paid directly to you as a lump sum payment by default. Please contact our office if you would like to roll over after-tax contributions. Upon receiving this completed form, your payment will be processed in the calendar month following your termination date. Your **DROP BENEFIT** is based on your **DROP termination date of:** 10/07/2023

<input type="checkbox"/> A lump sum election means the FRS will mail your DROP payment directly to you at the address on file, minus the required federal withholding taxes. *The tax amount below is subtracted from the gross DROP balance to determine the net lump sum payment. Tax Calculation: \$ 18,348.86 (20% non-RMD amount) \$ 0.00 (10% RMD amounts)	Gross DROP Balance: \$ 91,744.31 RMD \$ 0.00 After-Tax Contributions: \$ 0.00 *Net Lump Sum Payment: \$ 73,395.45
<input checked="" type="checkbox"/> A direct rollover election means the FRS will mail your gross DROP rollover amount directly to the custodian of your selected qualified plan. The receiving financial institution's representative must complete the rollover section below. If you choose to roll your DROP into a ROTH account, the taxation will default to 0% unless you make a federal tax withholding selection here: _____ 10% _____ 20%	Default Gross Lump Sum Payment (RMD and After-tax contributions): \$ 0.00 Gross DROP Rollover: \$ 91,744.31
<input type="checkbox"/> Partial lump sum Add the additional lump sum amount I indicate to my default gross lump sum payment and then reduce the DROP rollover amount accordingly. I understand that the additional lump sum amount will be taxed.	Additional Lump Sum Amount \$ _____

By signing this form, I attest to having read the Special Tax Notice and authorize the FRS to release my DROP payments accordingly.

PAYEE'S SIGNATURE _____

(must be signed in the presence of a Notary)

Notary:

State of Florida, County of Manatee. The above named person has sworn to and subscribed before me this 2nd day of October 20 23 and is personally known X or produced _____ as identification.

Olwin Wischer 110047 05
Signature of Notary Public



Olwin Wischer
Comm.: HH 203675
Expires: Nov. 30, 2025
Notary Public - State of Florida

Print or Stamp Notary Public's Commission Name and Number

DP-PAYT
12/16
DROP Term/Refund

FLORIDA RETIREMENT SYSTEM PENSION PLAN
Deferred Retirement Option Program (DROP)
Selected Payout Method



PO BOX 9000 Tallahassee, FL 32315-9000
Local Phone: 850-907-6500 Toll Free: 844-377-1888 FAX: 850-410-2010

MEMBER NAME: APRIL ALLISON CULBREATH

MEMBER SSN: [REDACTED]

PAYEE NAME: APRIL ALLISON CULBREATH

PAYEE SSN: [REDACTED]

Gross DROP Rollover to this custodian: \$ 91,744.31

This Section is for ROLLOVERS, and must be filled out by a REPRESENTATIVE of the ELIGIBLE PLAN or IRA

Please select the type of account the rollover will be deposited to (as defined in s. 402(c)(8)(B) of the Internal Revenue Code) and provide the address to where the check should be mailed. **Upon receiving this completed form, a payment will be processed, no sooner than, the calendar month following the member's termination date noted above. Incomplete forms will be returned to the member and will delay the payment process.**

Annuity/Individual Retirement Account (IRA) as described in s. 408(a) and 408(b), Internal Revenue Code

☒ **Traditional** ☐ **ROTH** (excluding designated) - Taxation on ROTH rollovers will default to 0% unless otherwise noted above.

☐ **Qualified Plan** - A stock bonus, pension, or profit sharing plan of an employer as described in s. 401(a), 401(k), Internal Revenue Code

☐ **Deferred Compensation Plan** - as described in s. 457(b), Internal Revenue Code

☐ **Annuity** - as described in s. 403(a) or 403(b), Internal Revenue Code

Payable To: LPL Financial Account #: [REDACTED] Phone #: 866-866-0405
Financial Institution

Mail Payment to Address: LPL Financial Attn Dept M Representative: Ieva Navarro
1055 LPL Way Print Name
Fort Mill, SC 29715 Representative: [Signature] 10/1/23
Signature Date

Florida Retirement System Pension Plan
Health Insurance Subsidy Certification Form



Retired Payroll Section
PO BOX 9000 Tallahassee, FL 32315-9000
Local Phone: 850-907-6500 Toll Free: 844-377-1888

PAYEE SSN: _____

PAYEE NAME: April Culbreath

I hereby make application for the Health Insurance Subsidy (HIS). I have read the instructions on the enclosed sheet and checked one of the four boxes below. **I have checked the one box below that provides the earliest insurance coverage date.**

For FRS processing only


SIGNATURE OF PAYEE

10/01/2023

DATE


TELEPHONE NUMBER

SECTION A: To be completed by Payee who will have health premiums deducted from pension payment

- ☒ This is to certify that I have already completed the required paperwork to have payroll deduction of my health insurance premium from my Florida Retirement System (FRS) monthly benefit. I understand the subsidy will be added AFTER the insurance deduction begins. ***Please check with your former employer (local agencies) or the People First Service Center (state agencies) if you have questions about premium deductions from your retirement benefit.*

SECTION B: To be completed by former FRS (non-state) employer or People First Service Center (1-866-663-4735) for state agencies

- ☐ This is to certify that the above named payee had health insurance coverage effective _____ and is currently covered through our agency.

Signature: FRS Agency Representative
or People First Representative

Date

FRS Agency Name

Phone #

SECTION C: To be completed by Insurance Company - (insurance cards are not accepted.)

- ☐ This is to certify that the above named payee has health coverage with _____ (Company Name)
with an effective policy date of _____ (Date). (Please use the earliest possible coverage date).

Company Representative Signature

Date

Company Address

Phone #

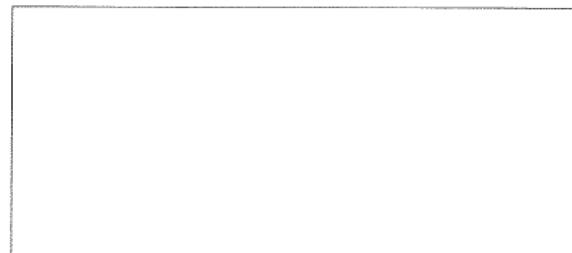
SECTION D: Payee provides MEDICARE or Military Insurance information

ATTACH COPY OF CARD HERE (MEDICARE OR MILITARY ID/TRICARE CARD)

- ☐ I have attached a photocopy of either a MEDICARE or Military ID/TRICARE card.

PLEASE DO NOT SEND YOUR ORIGINAL CARD.
It will not be returned.

NOTE: We will use your Medicare effective date to determine your HIS effective date. Your HIS effective date cannot be earlier than your Medicare effective date.



Please return completed form to the Retired Payroll Section. (See address above)

Other contact information:

Fax: 850- 410-2010

Email: Retirement@dms.myflorida.com



MANATEE COUNTY SHERIFF'S OFFICE
DEPUTY SHERIFF OATH OF OFFICE

10000486



I, April Culbreath, do solemnly swear or affirm that I will support, protect,
Print Deputy Name

and defend the Constitution and Government of the United States and of the State of Florida; that I will enforce the laws of the State of Florida and Manatee County; that I am duly qualified to hold office under the constitution of the State; and that I will well and faithfully perform the duties of Deputy Sheriff of Manatee County, on which I am about to enter. So help me God.

[Signature]
Deputy Signature

Sworn to or affirmed and subscribed before me this 3rd day of January 2017 by

April Culbreath
Print Deputy Name

[Signature]
Signature of Notary Public



Eric Isola
Commission # FF069036
Expires: March 8, 2020
Bonded thru Aaron Notary

Personally Known ☒

OR

Produced Identification ☐

Type of Identification: _____

April Culbreath, who has sworn to or affirmed this Oath of Office, is duly
Print Deputy Name

appointed as Deputy Sheriff of Manatee County, Florida and is empowered and duty bound to enforce the statutes of the State of Florida and ordinances of Manatee County.

Charles R. Wells

Charles R. Wells, Sheriff of Manatee County



MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION FORM



NAME: <u>Culbreath, April</u>		EFFECTIVE DATE: <u>3/6/2016</u>	
Last First		ID#: <u>10000486</u>	
PREVIOUS TEMP. / VOLUNTEER ID#: _____			
CHECK APPLICABLE BOX		SEPARATION OF EMPLOYMENT	
<input type="checkbox"/> NEW EMPLOYEE <input type="checkbox"/> VOLUNTEER		<input type="checkbox"/> RESIGNATION <input type="checkbox"/> SEPARATION	
<input type="checkbox"/> REHIRE <input type="checkbox"/> TEMP EMPLOYEE		<input type="checkbox"/> RETIREMENT <input type="checkbox"/> TERMINATION	
<input checked="" type="checkbox"/> TRANSFER <input type="checkbox"/> INTERN		<input type="checkbox"/> RETIRED TO RESERVES <input type="checkbox"/> DECEASED	
<input type="checkbox"/> PROMOTION		HR USE ONLY	
<input type="checkbox"/> OTHER _____		IA Status Verified: _____	
		ATMS (Form 81) Completed: _____	
CURRENT STATUS			
CURRENT STATUS	POSITION TITLE: <u>LE Detective</u> COST CENTER: <u>16352</u>		HOURLY RATE: _____
	REPORTS TO: <u>Sergeant Karen Devries</u>		ANNUAL RATE: _____
	BUREAU: <u>Investigative</u> DIVISION: <u>CID</u> SECTION: <u>Property B</u>		
	BUREAU CHIEF / HR DIRECTOR SIGNATURE: _____		DATE: <u>3/2/16</u>
PROPOSED STATUS			
PROPOSED STATUS	POSITION TITLE: <u>LE Detective</u> COST CENTER: <u>16351</u>		
	REPORTS TO: <u>Sergeant Christopher D'Agostino</u>		
	BUREAU: <u>Investigative</u> DIVISION: <u>CID</u> SECTION: <u>Property FAP</u>		
	Is the proposed status a supervisory position? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If Yes, list NEW subordinates: _____
	_____		_____
	_____		_____
PLACED ON PROBATION:		FIRST TIME MSO SUPERVISOR? (PMP Training)	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> DO NOT EXTEND		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No DATE: _____	
BUREAU CHIEF / HR DIRECTOR SIGNATURE: _____		DATE: <u>3/2/16</u>	
EQUIPMENT REQUIRE			
<input type="checkbox"/> Uniforms / Equipment: (Form #00-079) <input checked="" type="checkbox"/> Computer Access: (Form # 91-082) <input type="checkbox"/> Radio: (Form # 91-068)			
<input type="checkbox"/> Vehicle: (Form # 00-078) <input checked="" type="checkbox"/> Transfer of Asset / Inventory: (Form # 00-073)			
PAYROLL INFORMATION			
JOB CODE: _____	HOURLY RATE: _____	RETIREMENT: _____	INSURANCE DEDUCTIONS:
PAY GRADE: _____	ANNUAL RATE: _____	AA CODE: _____	<input type="checkbox"/> None <input type="checkbox"/> Single <input type="checkbox"/> Double
PAY CLASS: _____	SCHEDULED HRS: _____	REVIEW DATE: _____	Deductions Term Date: _____

CW

MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL ACTION FORM

NAME WATSON-DUGAN, APRIL MICHELLE COMPONENT ENFORCEMENT SUBMITTED 05-02-97
ADDRESS _____ EMPLOYEE ID # D-86 EFFECTIVE 05-05-97
CITY/ST. _____ SOC.SEC.# _____ BIRTHDATE 09-20-73
PHONE () _____ PERSONNEL ORDER # 97-331

TYPE OF ACTION

<u>XXXX</u> APPOINTMENT	<u>XXXX</u> FULL TIME	_____ PART TIME
_____ RESIGNATION	_____ VOLUNTARY	_____ INVOLUNTARY
_____ PROMOTION	_____ TRANSFER	_____ DEMOTION
_____ RECLASSIFICATION	_____ RETIREMENT	_____ TERMINATION
_____ DEATH	_____ SUSPENSION	_____ REASSIGNMENT

LAST WORKING DAY _____ OTHER _____

FOR PAYROLL ONLY

HOURLY PAY RATE	<u>\$8.99</u>	WORKERS COMP CODE	<u>7720</u>
SCHEDULED HOURS	<u>86.0 HRS</u>	VACATION ACCRUAL	<u>3.3077</u>
RETIREMENT CODE	<u>HB</u>	SICK ACCRUAL RATE	<u>3.9231</u>
JOB CODE	<u>4000</u>	NEXT REVIEW DATE	<u>05-05-97</u>
COST CENTER	<u>001.521307.0</u>	COST DISTRIBUTION	<u>001.521000.0</u>


DETAILS

NEW APPOINTMENT:

As L/E Deputy, TRU Unit

EFFECTIVE: **05 MAY 1997**

WAIVER: NO


MANAGER - PERSONNEL SECTION
MCSO FM 86-180 (REV.1992)

05/02/97
DATE



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

PERSONNEL ORDER

PO #: #97-331
TO: April Watson-Dugan
DATE: May 1, 1997
SUBJECT: Appointment
EFFECTIVE DATE: May 5, 1997

RECEIVED

MAY 01 1997

PERSONNEL SECTION

Effective Monday, May 5, 1997, you are appointed to the Enforcement Bureau, Patrol Division, Telephone Reporting Unit, Cost Center 521.307, to work as a Law Enforcement Deputy under the supervision of Captain Simonet.

Please report to Captain Simonet on the above date for instructions in your assignment.

CHARLES B. WELLS, SHERIFF
MANATEE COUNTY, FLORIDA

CBW/clt

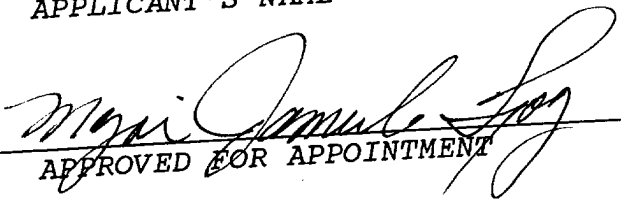
cc: Colonel Pearson
Major Steube
Captain Simonet
Spv. Peaslee
Fiscal Management
Personnel
Training
Purchasing/Supply
Planning/Research

MANATEE COUNTY SHERIFF'S OFFICE

APPROVAL SLIP

APRIL WATSON-DUGAN
APPLICANT'S NAME

LAW ENFORCEMENT DEPUTY
POSITION APPLIED FOR


APPROVED FOR APPOINTMENT

5-01-97
DATE

DISAPPROVED FOR APPOINTMENT

DATE

MCSO FM 86-14

Sheriff Approval CBW

Waiver - Yes No

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL LEAD SHEET REVIEW

PO #331

=====

NAME	April Watson-Dugan	ID	N/A D-86
REVIEW DATE	N/A	EFFECTIVE DATE	ASAP 5/5/97

=====

CURRENT STATUS

RECEIVED

APR 14 1997

BUREAU		DIVISION	
SECTION		UNIT	PERSONNEL SECTION
TITLE		GRADE	
HOURLY \$	ANNUAL \$.00	COST CTR
COMMENTS	N/A		

=====

PROPOSED STATUS

BUREAU	Enforcement	DIVISION	Dist #2
SECTION	N/A	UNIT	TRU
TITLE	Law Enforcement Deputy	GRADE	300
HOURLY \$	8.99	ANNUAL \$	20,101.64
		COST CTR	521-307

COMMENTS This is an 86hr special risk retirement position. Hire as soon as the application process has been successfully completed. Employee will be assigned to TRU until the next available FTEP Program.

=====

Laurie E. Chastain
COMPTROLLER

4-11-97
DATE

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDA

TO: Sheriff Charles B. Wells
THRU: Colonel Ken Pearson *KP*
FROM: Major Brad Steube *WBS*
Enforcement Bureau Chief
DATE: April 11, 1997
SUBJECT: Intent to Hire

Personnel has informed me by memoranda (attached) that the following applicants have completed all of the hiring requirements and are acceptable candidates for certified law enforcement positions:

Ronald Allen Johnston (Former Employee)
Jason Petry
Frank Santiago
April Watson-Dugan

I am asking that an intent to hire be issued on each applicant. Once hired, they will be assigned to the Telephone Reporting Unit until the next available FTEP Program.

WBS:ce

cc: Personnel

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDA

TO: COLONEL KEN PEARSON *Maj Steube*

THRU: DIRECTOR GENE LEONARD *GL*
PERSONNEL SECTION

FROM: MARGARET GILL,
PERSONNEL MANAGER *mg*

DATE: APRIL 4, 1997

SUBJECT: APPLICANTS APPROVED BY EMPLOYMENT ELIGIBILITY BOARD

This is to advise that the following applicants have completed all the applicant processes and have been approved by the Employment Eligibility Board as acceptable candidates for positions with this agency. They will only require doctors appointments and the drug screening, if an intent to hire is issued.

RONALD ALLEN JOHNSTON	CERTIFIED L/E (FORMER EMPLOYEE)
JASON PETRY	CERTIFIED L/E
FRANK J. SANTIAGO	CERTIFIED L/E
APRIL WATSON-DUGAN	CERTIFIED L/E

We also had one non-certified applicant for law enforcement approved:

CHAD CARNEGIE	NON-CERTIFIED
---------------	---------------

These files are available for review upon request.

/m

cc: Major Steube

MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL ACTION FORM

NAME _____ COMPONENT ENFORCEMENT SUBMITTED 10-23-97
ADDR. _____ EMPLOYEE ID # D-86 EFFECTIVE 10-14-97
CITY _____ SOC. SEC. # _____ BIRTHDATE [REDACTED]
PHONE () _____ PERSONNEL ORDER # 97-725

TYPE OF ACTION

_____ APPOINTMENT	_____ FULL TIME	_____ PART TIME
_____ RESIGNATION	_____ VOLUNTARY	_____ INVOLUNTARY
_____ PROMOTION	<u>XXXX</u> TRANSFER	_____ DEMOTION
_____ RECLASSIFICATION	_____ RETIREMENT	_____ TERMINATION
_____ DEATH	_____ SUSPENSION	_____ REASSIGNMENT

LAST WORKING DAY _____ OTHER _____

FOR PAYROLL ONLY

HOURLY PAY RATE	<u>\$9.26</u>	WORKERS COMP CODE	<u>N/C</u>
SCHEDULED HOURS	<u>86.0 HRS</u>	VACATION ACCRUAL	<u>N/C</u>
RETIREMENT CODE	<u>N/C</u>	SICK ACCRUAL RATE	<u>N/C</u>
JOB CODE	<u>4000</u>	NEXT REVIEW DATE	<u>N/C</u>
COST CENTER	<u>001.521303.0</u>	COST DISTRIBUTION	<u>001.521000.0</u>

DETAILS

TRANSFER:

From: L/E Deputy, TRU Unit
To: L/E Deputy, FTEP Unit, District #3

EFFECTIVE: 14 OCTOBER 1997

WAIVER: NO

Margaret Smith
MANAGER - PERSONNEL SECTION
MCSO FM 86-180 (REV.1992)

10/24/97
DATE



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

PERSONNEL ORDER

NUMBER: 97-725
TO: Deputy April Watson-Dugan
FROM: CHARLES B. WELLS, SHERIFF
Manatee County, Florida
DATE: 10/22/97
SUBJECT: Transfer
EFFECTIVE DATE: 10/14/97

This is to advise effective October 14, 1997, you are transferred to the FTEP Unit, District #3 Division, Enforcement Bureau.

If you have any questions, please contact Major Steube.

Charles B Wells

CHARLES B. WELLS, SHERIFF
Manatee County, Florida

CBW:cw

cc: Colonel Pearson
Major Steube
Captain Murphy
Captain Simonet
Fiscal Management
Personnel

Training
Planning & Research
Purchasing & Supply
Communications

Sheriff Approval

[Signature]

Waiver - Yes

No ☒ X

725

MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL LEAD SHEET REVIEW

=====

NAME	April M. Watson-Dugan	ID
------	-----------------------	----

REVIEW DATE	N\A	EFFECTIVE DATE	10-14-97
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=====

CURRENT STATUS

BUREAU	Enforcement	DIVISION	Dist #2
SECTION	N\A	UNIT	TRU
TITLE	Law Enforcement Deputy	GRADE	300
HOURLY	\$ 9.26	ANNUAL	\$ 20,705.36
		COST CTR	521-307

COMMENTS N\A

=====

PROPOSED STATUS

BUREAU	Enforcement	DIVISION	Dist #3
SECTION	N\A	UNIT	FTEP
TITLE	Law Enforcement Deputy	GRADE	300
HOURLY	\$ 9.26	ANNUAL	\$ 20,705.36
		COST CTR	521-303

COMMENTS Effective 9-02-97, 10-14-97 for payroll purposes, you are transferred to the FTEP. No change in salary, retirement or accruals.

=====

[Signature]
COMPTROLLER

10/17/97

DATE

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D A

TO: Director B. J. Smith
Training

THRU: Colonel Ken Pearson
Chief Deputy

FROM: Major W. B. Steube *WBS*
Enforcement Bureau Chief

DATE: August 15, 1997

SUBJECT: Personnel To Attend Next FTEP

The following personnel will be attending the next FTEP which begins September 2, 1997:

Reginald Blevin
Neil Raftery
Robert Pereyra
Brett Getman
Preston Spear
Kane Parham
Daniel Dickerman
Roy Joslin
Benjamin Slocum
Joseph Skala
Kevin Duryea
~~Jason Petry~~ *RESIGNED*
April Watson-Dugan
Christopher Tucker
Tidd Zink

The following personnel will be attending the Community Service Officer (CSO) Field Training Program:

Andrea Embry
Jennifer Tuman
Jerry Crotty
Connie Schob

WBS:ce

cc: Lieutenant Baroncelli
Unit Manager Bill Peaslee

MANATEE COUNTY SHERIFF'S DEPARTMENT
P E R S O N N E L A C T I O N

EMPLOYEE NAME: APRIL M WATSON-DUGAN DATE PROCESSED: 10-23-97
EMPLOYEE NUMBER: 0000000000 SOC. SEC. NUMBER:
DEPARTMENT: 521307 - TRU/CSD UNITS 04
PRESENT JOB CODE: 004000 - ENTRY LEVEL L/E OFFICER 04
PRESENT PAY RANGE AND STEP: 0000/00 PAY CODE: 3 TYPE OF EMPLOYEE: 1
PRESENT POSITION NUMBER: 0000 NEW POSITION NUMBER:
RATE: PRES: 9.2600 LAST: 8.9900 05/05/97 PREV: 0.0000 00/00/00
DATE OF LAST UPDATE: 05-05-97 TYPE OF LAST PERSONNEL ACTION: AP
DATE OF HIRE: 05-05-97 REVIEW DATE: 05-05-97 NEXT REVIEW: ()
DATE OF LAST PAY CHANGE: 05-05-97
DATE OF RATE CHANGE: (9/30/97) NEW JOB CODE: ()
NEW PAY RANGE AND STEP: () NEW HOURLY RATE: ()
ADDITIONAL COMMENTS: NEW BI-WEEKLY RATE: ()

() APPROVED
() DISAPPROVED

DATE

DIVISION COMMANDER

() APPROVED
() DISAPPROVED

DATE

BUREAU COMMISSIONER

() APPROVED
() DISAPPROVED

DATE

UNDERSHERIFF

() APPROVED
() DISAPPROVED

DATE

PERSONNEL DIRECTOR

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION FORM

NAME WATSON-DUGAN, APRIL COMPONENT ENFORCEMENT DATE 01/14/98
 AI EMPLOYEE ID# D-86 EFFECTIVE 01/20/98
 CI SOC.SEC.# _____ BIRTHDATE _____
 PA PERSONNEL ORDER # PO 98-31

TYPE OF ACTION

____ APPOINTMENT	____ FULL TIME	____ PART TIME
____ RESIGNATION	____ VOLUNTARY	____ INVOLUNTARY
____ PROMOTION	<u>XXXX</u> TRANSFER	____ DEMOTION
____ RECLASSIFICATION	____ RETIREMENT	____ TERMINATION
____ DEATH	____ SUSPENSION	____ REASSIGNMENT

LAST WORKING DAY _____ OTHER _____

FOR PAYROLL ONLY

HOURLY PAY RATE _____	WORKERS COMP CODE <u>N/C</u>
SCHEDULED HOURS <u>86.0 HRS</u>	VACATION ACCRUAL <u>N/C</u>
RETIREMENT CODE <u>HB</u>	SICK ACCRUAL RATE <u>N/C</u>
JOB CODE <u>4000</u>	REVIEW DATE <u>N/C</u>
COST CENTER <u>001.521302.0</u>	COST DISTRIBUTION <u>001.521000.0</u>

DETAILS

TRANSFER:

To Squad #3 West, District II,
 Congratulations on your completion of the FTEP!

EFFECTIVE: 01/20/98

Margaret Dill

 MANAGER - PERSONNEL SECTION
 MCSO FM 86-180 (Rev.1992)

01/29/98

 DATE

MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL ACTION FORM

NAME WATSON-DUGAN, APRIL COMPONENT ENFORCEMENT DATE 01/14/98
ADL EMPLOYEE ID# D-86 EFFECTIVE 01/20/98
CIT SOC.SEC.# BIRTHDATE [REDACTED]
PAG PERSONNEL ORDER # PO 98-31

TYPE OF ACTION

<input type="checkbox"/> APPOINTMENT	<input type="checkbox"/> FULL TIME	<input type="checkbox"/> PART TIME
<input type="checkbox"/> RESIGNATION	<input type="checkbox"/> VOLUNTARY	<input type="checkbox"/> INVOLUNTARY
<input type="checkbox"/> PROMOTION	<input checked="" type="checkbox"/> XXXX TRANSFER	<input type="checkbox"/> DEMOTION
<input type="checkbox"/> RECLASSIFICATION	<input type="checkbox"/> RETIREMENT	<input type="checkbox"/> TERMINATION
<input type="checkbox"/> DEATH	<input type="checkbox"/> SUSPENSION	<input type="checkbox"/> REASSIGNMENT

LAST WORKING DAY _____ OTHER _____

FOR PAYROLL ONLY

HOURLY PAY RATE <u>\$ 9.26</u>	WORKERS COMP CODE <u>N/C</u>
SCHEDULED HOURS <u>86.0 HRS</u>	VACATION ACCRUAL <u>N/C</u>
RETIREMENT CODE <u>HB</u>	SICK ACCRUAL RATE <u>N/C</u>
JOB CODE <u>4000</u>	REVIEW DATE <u>N/C</u>
COST CENTER <u>001.521303.0</u>	COST DISTRIBUTION <u>001.521000.0</u>

DETAILS

TRANSFER:

To Squad #3 West, District III, .
Congratulations on your completion of the FTEP!

EFFECTIVE: 01/20/98

Margaret Biel
MANAGER - PERSONNEL SECTION

01/14/98
DATE



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

PERSONNEL ORDER

NUMBER: 98-31
TO: Deputy April Watson-Dugan
FROM: CHARLES B. WELLS, SHERIFF
Manatee County, Florida
DATE: 01/13/98
SUBJECT: Transfer
EFFECTIVE DATE: 01/20/98

This is to advise effective January 20, 1998, you are transferred to Squad #3 West Unit, District #3 Division, Enforcement Bureau.

If you have any questions, please contact Major Steube.

Charles B Wells

CHARLES B. WELLS, SHERIFF
Manatee County, Florida

CBW:cw

cc: Colonel Pearson
Major Steube
Captain Murphy
Captain Simonet
Fiscal Management
Personnel

Training
Planning & Research
Purchasing & Supply
Communications

Sheriff Approval CBW

Waiver - Yes

No X

31

MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL LEAD SHEET REVIEW

=====

NAME	April M. Watson-Dugan	ID	
REVIEW DATE	N\A	EFFECTIVE DATE	01-20-98

=====

CURRENT STATUS

BUREAU	Enforcement	DIVISION	Dist #3
SECTION	N\A	UNIT	FTEP
TITLE	Law Enforcement Deputy	GRADE	300
HOURLY	\$ 9.26	ANNUAL	\$ 20,705.36
		COST CTR	521-303
COMMENTS	N\A		

=====

PROPOSED STATUS

BUREAU	Enforcement	DIVISION	Dist #3
SECTION	N\A	UNIT	Squad #3 West
TITLE	Law Enforcement Deputy	GRADE	300
HOURLY	\$ 9.26	ANNUAL	\$ 20,705.36
		COST CTR	521-303
COMMENTS	Effective 1-20-98 you are assigned to Squad #3 West. Congratulations on your completion of the FTEP.		

=====

Louie E. Christie
COMPTROLLER

01/13/98

DATE

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Deputy April Dugan

THRU: Captain Larry Murphy
Lieutenant J. A. Baroncelli
Sergeant Dan Kaufman
Sergeant Sandy McIver

FROM: Major W. B. Steube *WBS*
Chief, Enforcement Bureau

DATE: January 12, 1998

SUBJECT: Squad assignment

Effective Tuesday January 20, 1998, you are assigned to Squad 3 West under the supervision of Lieutenant Richard Walker and Sergeant Pete Rampone. Please report for duty at District II on Wednesday January 21, 1998 at 3:00 p.m. Congratulations on your completion of the Field Training and Evaluation Program.

You will remain on this squad after the February 03, 1998 shift bid change.

cc: Colonel Ken Pearson
Lannie Christie
Captain Pat Simonet
Lieutenant Walker
Sergeant Rampone
File

WBS/wbs

MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL ACTION FORM

NAME WATSON-DUGAN, APRIL M COMPONENT ENFORCEMENT SUBMITTED 05-22-98
ADDR: _____ EMPLOYEE ID # D-86 EFFECTIVE 05-26-98
CITY/ _____ SOC.SEC. _____ IDATE
PHONE _____ PERSONNEL ORDER # 98-377

TYPE OF ACTION

_____ APPOINTMENT	_____ FULL TIME	_____ PART TIME
_____ RESIGNATION	_____ VOLUNTARY	_____ INVOLUNTARY
_____ PROMOTION	<u>XXXX</u> TRANSFER	_____ DEMOTION
_____ RECLASSIFICATION	_____ RETIREMENT	_____ TERMINATION
_____ DEATH	_____ SUSPENSION	_____ REASSIGNMENT

LAST WORKING DAY _____ OTHER _____

FOR PAYROLL ONLY

HOURLY PAY RATE	<u>N/C</u>	WORKERS COMP CODE	<u>N/C</u>
SCHEDULED HOURS	<u>N/C</u>	VACATION ACCRUAL	<u>N/C</u>
RETIREMENT CODE	<u>N/C</u>	SICK ACCRUAL RATE	<u>N/C</u>
JOB CODE	<u>4000</u>	NEXT REVIEW DATE	<u>N/C</u>
COST CENTER	<u>001.521303.0</u>	COST DISTRIBUTION	<u>001.521000.0</u>

DETAILS

TRANSFER:

From: L/E Deputy, Squad #3W, District #2
To: L/E Deputy, Squad #3E, District #3

EFFECTIVE: 26 MAY 1998

WAIVER: NO

Margaret Gill
MANAGER - PERSONNEL SECTION
MCSO FM 86-180 (REV. 1992)

05/22/98
DATE



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

PERSONNEL ORDER

NUMBER: 98-377

TO: Deputy April Watson-Dugan

FROM: Charles B. Wells, Sheriff

DATE: 05/21/98

SUBJECT: Transfer

EFFECTIVE DATE: 05/26/98

This is to advise effective May 26, 1998, you are transferred to Squad #3 East, District #3, Enforcement Bureau. If you have any questions, please contact Major Steube.

CHARLES B. WELLS, SHERIFF
Manatee County, FL

CBW:cw

cc: Colonel Pearson
Major Steube
Captain Murphy
Captain Simonet

Fiscal Management
Personnel
Planning & Research
Purchasing & Supply

Training
Communications

Sheriff Approval CBWOath Yes _____ No X

Waiver Yes _____

No X

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MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL LEAD SHEET REVIEW

NAME April M. Watson-Dugan

REVIEW DATE N/A

EFFECTIVE DATE 5/26/98

CURRENT STATUS

BUREAU Enforcement

DIVISION Dist #2

SECTION N/A

UNIT Squad # 3 West

TITLE Law Enforcement Deputy

GRADE 300

HOURLY \$ 9.26 ANNUAL \$ 20,705.36

COST CTR 521-302

COMMENTS

N/A

PROPOSED STATUS

BUREAU Enforcement

DIVISION Dist #3

SECTION N/A

UNIT Squad #3 East

TITLE Law Enforcement Deputy

GRADE 300

HOURLY \$ 9.26 ANNUAL \$ 20,705.36

COST CTR 521-303

COMMENTS

Effective 5-26-98 you are transfered to Squad # 3 East.



COMPTROLLER

5/20/98

DATE

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Deputy April Dugan

THRU: Captain Pat Simonet
Lieutenant Richard Walker
Sergeant Carl Gibson

FROM: Major W. B. Steube *WBS*
Chief, Enforcement Bureau

DATE: May 19, 1998

SUBJECT: Squad assignment

Effective Tuesday May 26, 1998, you will be transferred from Squad 3 West to Squad 3 East under the supervision of Sergeant Bill Jordan, and Sergeant Larry Andress. This transfer is taking place upon the request of your chain of command.

cc: Colonel Ken Pearson
Lannie Christie
Captain Larry Murphy
Sergeant Jordan
Sergeant Andress
File

WBS/wbs

MANATEE COUNTY SHERIFF'S DEPARTMENT

P E R S O N N E L A C T I O N

EMPLOYEE NAME: APRIL M WATSON DATE PROCESSED: 05-03-99

EMPLOYEE NUMBER: 0000000000 SOC. SEC. NUMBER: [REDACTED]

DEPARTMENT: 521303 - UNIFORM PATROL DISTRICT #3 04

PRESENT JOB CODE: 004000 - ENTRY LEVEL L/E OFFICER 04

PRESENT PAY RANGE AND STEP: 0000/00 PAY CODE: 3 TYPE OF EMPLOYEE: 1

PRESENT POSITION NUMBER: 0000 NEW POSITION NUMBER:

RATE: PRES: 9.2600 LAST: 8.9900 05/05/97 PREV: 0.0000 00/00/00

DATE OF LAST UPDATE: 00-00-00 TYPE OF LAST PERSONNEL ACTION:

DATE OF HIRE: 05-05-97 REVIEW DATE: 05-05-99 NEXT REVIEW: (5/5/00)

DATE OF LAST PAY CHANGE: 05-05-97

DATE OF RATE CHANGE: (5/10/99) NEW JOB CODE: ()

NEW PAY RANGE AND STEP: () NEW HOURLY RATE: (11.44)

ADDITIONAL COMMENTS: NEW BI-WEEKLY RATE: ()

() APPROVED
() DISAPPROVED

DATE

DIVISION COMMANDER

() APPROVED
() DISAPPROVED

DATE

BUREAU COMMISSIONER

() APPROVED
() DISAPPROVED

DATE

UNDERSHERIFF

(✓) APPROVED
() DISAPPROVED

5/4/99

DATE

J. H. Mout

PERSONNEL DIRECTOR
FISCAL

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION FORM

NAME WATSON, APRIL MICHELLE ID# 10000486 / D-86 SS #

COMPONENT ENFORCEMENT PERSONNEL ORDER # NONE ISSUED DATE 11/23/99

TYPE OF ACTION

<u> </u> APPOINTMENT	<u> </u> FULL TIME	<u> </u> PART TIME
<u> </u> RESIGNATION	<u> </u> VOLUNTARY	<u> </u> INVOLUNTARY
<u> </u> PROMOTION	<u> </u> TRANSFER	<u> </u> DEMOTION
<u> </u> RECLASSIFICATION	<u> </u> RETIREMENT	<u> </u> TERMINATION
<u> </u> DEATH	<u> </u> SUSPENSION	<u> </u> REASSIGNMENT

OTHER COLLATERAL DUTY

FOR PAYROLL PURPOSES ONLY

HOURLY PAY RATE <u> </u> N/C	PAY RATE EFF DATE <u> </u> N/C
EFF HIRE DATE <u> </u> N/C	NEXT REVIEW DATE <u> </u> N/C
SCHEDULED HOURS <u> </u> N/C (20, 40, 60, 80, 86)	VACATION ACCRUAL <u> </u> N/C
RETIREMENT CODE <u> </u> N/C	SICK ACCRUAL RATE <u> </u> N/C
JOB CODE <u> </u> 4000	WORKERS' COMP CODE <u> </u> N/C
NEW COST CENTER(OLD) <u>001.8000.</u> (521303) AA CODE <u>WHTF</u>	PAY CLASS <u>400</u>
FAST KEY -	

PAY STEP 2-3

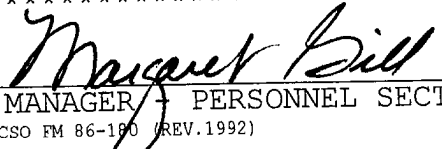
DETAILS

COLLATERAL DUTY:

As an Associate Advisor for the MCSO Explorer Post

EFFECTIVE: 23 NOVEMBER 1999

WAIVER: NO



MANAGER, PERSONNEL SECTION
MCSO FM 86-180 (REV.1992)

November 23, 1999
DATE

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

RECEIVED
NOV 22 1999
PERSONNEL SECTION

TO: Director Gene Leonard

FROM: Sgt. S. K. McIver *SKM 11-21-99*

DATE: November 21, 1999

SUBJECT: Cadet Advisor

Attached is a memo from Deputy April Watson requesting to become a associate advisor for the Manatee County Sheriff's Office Explorer Post. It has been approved by her chain of command. Please process the necessary paperwork so that she can begin her collateral duties.

If you have any questions please feel free to contact me at ext. 2296. Thank you for your assistance.

MANATEE COUNTY SHERIFF'S OFFICE MEMORANDUM

SANDY -
IF YOU NEED
HELP, SUBMIT A
MEMO TO DIA
LEONARD SO HE
CAN DO NECESSARY
PAPERWORK.

TO: Major W. B. Steube *APPROVED 11/18/99*

THRU: Captain M. Mayer *MMB 11.16.99*
Lt. R. Walker *RW 11-15-99*
Sgt. S. McIver *SM 11-15-99*

FROM: Deputy April M. Watson

DATE: November 14th, 1999

SUBJECT: Cadet Advisor

I am very interested in the Cadet program. I have had the opportunity to work with the kids in the past. In speaking to Sgt. Sandy McIver, and some of the other Associate Advisors, I understand that there may be a need for another female advisor. I find working with young people very rewarding in that I may be able to help lead the kids in the right direction. I would like to work with the cadets on a regular basis. Please consider my request to become an Associate Advisor for the Sheriff's Office Cadet Program.

NAME WATSON, APRIL MICHELLE ID# 10000486 / D-86 SS #

COMPONENT ENFORCEMENT _____ PERSONNEL ORDER # 00-109 DATE 1/31/00

_____ APPOINTMENT	_____ FULL TIME	_____ PART TIME
_____ RESIGNATION	_____ VOLUNTARY	_____ INVOLUNTARY
_____ PROMOTION	<u>XXXX</u> TRANSFER	_____ DEMOTION
_____ RECLASSIFICATION	_____ RETIREMENT	_____ TERMINATION
_____ DEATH	_____ SUSPENSION	_____ REASSIGNMENT

OTHER _____

HOURLY PAY RATE	<u>N/C</u>	PAY RATE EFF DATE	<u>N/C</u>
EFF HIRE DATE	<u>N/C</u>	NEXT REVIEW DATE	<u>N/C</u>
SCHEDULED HOURS	<u>N/C</u>	VACATION ACCRUAL	<u>N/C</u>
(20,40,60,80,86)		SICK ACCRUAL RATE	<u>N/C</u>
RETIREMENT CODE	<u>N/C</u>	WORKERS' COMP CODE	<u>N/C</u>
JOB CODE	<u>4000</u>		
NEW COST CENTER(OLD)	<u>001.8000.304 (521303)</u>	AA CODE	<u>WHTF</u>
FAST KEY - 18304		PAY CLASS	<u>N/C</u>

PAY STEP 2-3

TRANSFER:

From: L/E Deputy, Squad #3E, Section Three, District #2
To: L/E Deputy, Squad #4E, Section Four, District #3

EFFECTIVE: 01 FEBRUARY 2000

WAIVER: NO

Margaret Biss
MANAGER / PERSONNEL SECTION
MCSO FM 86-180 (REV.1992)

January 31, 2000
DATE



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, FL 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

PERSONNEL ORDER

NUMBER: 00-109
TO: Deputy April Watson
FROM: Charles B. Wells, Sheriff
DATE: 01/28/00
SUBJECT: Transfer
EFFECTIVE DATE: 02/01/00

RECEIVED
JAN 31 2000
PERSONNEL SECTION

This is to advise effective February 1, 2000 you are transferred to Squad #4E Unit, Four Section, District #3 Division, Enforcement Bureau.

CHARLES B. WELLS, SHERIFF
Manatee County, FL

CBW:cw

cc:	Colonel Pearson	Fiscal Management	Training
	Major Steube	Personnel	Communications
	Captain Hagaman	Planning & Research	
	Captain Mayer	Purchasing & Supply	

Sheriff Approval *AW* Oath Yes No X Waiver Yes No X

109

MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL LEAD SHEET REVIEW

NAME	April M. Watson	ID #	10000486
------	-----------------	------	----------

REVIEW DATE	05-05-00	EFFECTIVE DATE	02-01-00
-------------	----------	----------------	----------

CURRENT STATUS

BUREAU	Enforcement	DIVISION	Dist #2
SECTION	Three	UNIT	Squad #3E
TITLE	Deputy Sheriff	SCH HOURS	86
HOURLY	\$ 11.44 ANNUAL	\$ 25,579.84 PAYSTRING	0018000203/400/4000/2-3

PROPOSED STATUS

BUREAU	Enforcement	DIVISION	Dist #3
SECTION	Four	UNIT	Squad #4E
TITLE	Deputy Sheriff	SCH HOURS	86
HOURLY	\$ 11.44 ANNUAL	\$ 25,579.84 PAYSTRING	0018000304/400/4000/2-3
SCH HOURS	PAY CLASS	PAY STEP	

COMMENTS This is a Squad change only.

LhC

COMPTROLLER

1/26/00

DATE

Manatee County Sheriff's Department
Personnel Action

Employee Name: WATSON, APRIL M

Date Processed: 05/01/2000

Employee Number: 10000486

Soc. Sec. Number:

Department: 0018000304

Present Hourly Rate: \$11.44

Present Pay Range and Step: 0018000304/ / 400/4000 / 2-3

Date of Hire: 05/05/1997

Review Date: 05/05/00

Next Review: (5/5/01)

Date of Rate Change: (4/5/00)

New Pay Range and Step: (3-4

) **New Hourly Rate:** (11.78)

(✓) **Approved**

5/1/00

Date

Harmount

Fiscal Director

NAME WATSON, APRIL MICHELLE ID# 10000486 / D-86 SS #

COMPONENT ENFORCEMENT PERSONNEL ORDER # 00-736 DATE 10/10/00

_____ APPOINTMENT	_____ FULL TIME	_____ PART TIME
_____ RESIGNATION	_____ VOLUNTARY	_____ INVOLUNTARY
_____ PROMOTION	<u>XXXX</u> TRANSFER	_____ DEMOTION
_____ RECLASSIFICATION	_____ RETIREMENT	_____ TERMINATION
_____ DEATH	_____ SUSPENSION	_____ REASSIGNMENT

OTHER _____

 FOR PAYROLL PURPOSES ONLY

HOURLY PAY RATE	<u>N/C</u>	PAY RATE EFF DATE	<u>N/C</u>
EFF HIRE DATE	<u>N/C</u>	NEXT REVIEW DATE	<u>N/C</u>
SCHEDULED HOURS	<u>N/C</u>	VACATION ACCRUAL	<u>N/C</u>
(20, 40, 60, 80, 86)			
RETIREMENT CODE	<u>N/C</u>	SICK ACCRUAL RATE	<u>N/C</u>
JOB CODE	<u>4000</u>	WORKERS' COMP CODE	<u>N/C</u>

NEW COST CENTER(OLD) 001.8000.306 (521303) AA CODE WHTF PAY CLASS 400
FAST KEY - 18306

PAY STEP ~~2-3~~ 3-4

DETAILS

TRANSFER:

From: L/E Deputy, Squad #4E, Section Four, District #3
To: L/E Deputy, Squad #6E, Seciton Six, District #3

EFFECTIVE: 10 OCTOBER 2000

WAIVER: NO

Margaret Gidd
MANAGER - PERSONNEL SECTION
MCSO FM 86-160 (REV.1992)

October 10, 2000
DATE



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, FL 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

PERSONNEL ORDER

NUMBER: 00-736
TO: Deputy April Watson
FROM: Charles B. Wells, Sheriff
DATE: 10/09/00
SUBJECT: Transfer
EFFECTIVE DATE: 10/10/00

RECEIVED
OCT 10 2000
PERSONNEL SECTION

This is to advise effective October 10, 2000 you are transferred to Squad #6 East Unit, Six Section, District #3 Division, Enforcement Bureau.

CHARLES B. WELLS, SHERIFF
Manatee County, FL

CBW:cw

cc: Colonel Pearson
Major Steube
Captain Hagaman
Captain Mayer

Fiscal Management
Personnel
Planning & Research
Purchasing & Supply

Training
Communications

LEAD SHEET SWORN

736

Sheriff Approval cbwOath Yes _____ No X _____Waiver Yes _____ No X _____

MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL LEAD SHEET REVIEW

NAME	April M. Watson	ID #	10000486
------	-----------------	------	----------

REVIEW DATE	05-05-01	EFFECTIVE DATE	10-10-00
-------------	----------	----------------	----------

CURRENT STATUS

BUREAU	Enforcement	DIVISION	Dist #3		
SECTION	Four	UNIT	Squad #4 East		
TITLE	Deputy Sheriff	SCH HOURS	86	PAY GRADE	300
HOURLY	\$ 11.78	ANNUAL	\$ 26,340.08	PAYSTRING	18304/400/4000/2-3

PROPOSED STATUS

BUREAU	Enforcement	DIVISION	Dist #3		
SECTION	Six	UNIT	Squad #6 East		
TITLE	Deputy Sheriff	SCH HOURS	86	PAY GRADE	300
HOURLY	\$ 11.78	ANNUAL	\$ 26,340.08	PAYSTRING	18306/400/4000/2-3

COMMENTS Effective 10-10-00 you are transferred to Squad #6 East.


COMPTROLLER

10/6/0010:46 AM

DATE

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Deputy April Watson

THRU: Captain John C. Hagaman
Lieutenant John A. Baroncelli

FROM: Major W. B. Steube
Chief, Enforcement Bureau

DATE: October 06, 2000

SUBJECT: Assignment

Effective Tuesday October 10, 2000, you are transferred from squad 4 East to Squad 6 East. You will be under the supervision of Lieutenant Guy Stroup, Sergeant Dwight Townsend and Sergeant Mecky DeCesare. Report for duty at District III on Tuesday October 10, 2000 at 1900 hours. This transfer is upon your request.

cc: Colonel Ken Pearson
Captain Michael B. Mayer
Lannie Christie
Lieutenant Stroup
Sergeant Townsend
Sergeant DeCesare
Janet Loker
File

WBS/wbs



MANATEE COUNTY SHERIFF'S OFFICE
TRANSFER - PROMOTION - EVALUATION INFORMATION SHEET
Submit to Fiscal Management



EFFECTIVE DATE October 10, 2000

CHECK APPLICABLE BOX

☒ Transfer ☐ Promotion ☐ Promotion & Transfer ☐ Temporary Transfer - 3 months or less

****All applicable form information must be completed****

CURRENT STATUS (To be completed by initiating Bureau Chief)

EMPLOYEE'S NAME April Watson ID # 10000486

BUREAU Enforcement DIVISION District 3 SECTION/UNIT Section 4/Squad 4E
PRESENT POSITION
TITLE Patrol Deputy

INITIATING BUREAU CHIEF'S SIGNATURE

Maj. W. B. Stroup

PROPOSED STATUS (To be completed by receiving Bureau Chief)

BUREAU Enforcement DIVISION District 3 SECTION/UNIT Section 6/Squad 6E

NEW POSITION TITLE Patrol Deputy

NEW SHIFT ASSIGNMENT (Check One) 1st ☐ 2nd ☐ 3rd ☒ 4th ☐

NEW SUPERVISOR (Name & Rank) Lt. G. Stroup, Jr./Sgt. D. Townsend & Sgt. M. DeCesare

REQUIRES VEHICLE **TO BE** ASSIGNED (Check One) Yes ☒ No ☐ If Yes, Check Type Marked ☒ Unmarked ☐

COMPLETE THE FOLLOWING FOR SUPERVISORY POSITIONS ONLY

This supervisor will require access to the following named subordinates electronic evaluation data.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____

RECEIVING BUREAU CHIEF'S SIGNATURE

Maj. W. B. Stroup

5-5-97 DOH
9-30-97 Juc
5-10-99 Juc
4-25-99

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION FORM

NAME WATSON, APRIL MICHELLE ID# 10000486 / D-86 SS #

COMPONENT ENFORCEMENT PERSONNEL ORDER # 00-736 DATE 10/10/00

TYPE OF ACTION

<u>APPOINTMENT</u>	<u>FULL TIME</u>	<u>PART TIME</u>
<u>RESIGNATION</u>	<u>VOLUNTARY</u>	<u>INVOLUNTARY</u>
<u>PROMOTION</u>	<u>XXXX TRANSFER</u>	<u>DEMOTION</u>
<u>RECLASSIFICATION</u>	<u>RETIREMENT</u>	<u>TERMINATION</u>
<u>DEATH</u>	<u>SUSPENSION</u>	<u>REASSIGNMENT</u>

RECEIVED
OCT 10 2000

FINANCE-SHERIFF'S OFFICE

OTHER

FOR PAYROLL PURPOSES ONLY

HOURLY PAY RATE <u>N/C</u>	PAY RATE EFF DATE <u>N/C</u>
EFF HIRE DATE <u>N/C</u>	NEXT REVIEW DATE <u>N/C</u>
SCHEDULED HOURS <u>N/C</u> (20,40,60,80,86)	VACATION ACCRUAL <u>N/C</u>
RETIREMENT CODE <u>N/C</u>	SICK ACCRUAL RATE <u>N/C</u>
JOB CODE <u>4000</u>	WORKERS' COMP CODE <u>N/C</u>

NEW COST CENTER(OLD) 001.8000.306 (521303) AA CODE WHTF PAY CLASS 400
FAST KEY - 18306

PAY STEP 2-3 3-4

just for your info

DETAILS

TRANSFER:

From: L/E Deputy, Squad #4E, Section Four, District #3
To: L/E Deputy, Squad #6E, Seciton Six, District #3

EFFECTIVE: 10 OCTOBER 2000

WAIVER: NO

Margaret Gail
MANAGER - PERSONNEL SECTION
MCSO FM 86-180 (REV.1992)

October 10, 2000
DATE



PERSONNEL ACTION INFORMATION SHEET FEB 21 2001

EFFECTIVE DATE: 02/27/01

PERSONNEL SECTION
CHECK APPLICABLE BOX

☐ NEW EMPLOYEE ☐ PROMOTION ☐ TRANSFER ☐ RETIREMENT
☐ RESIGNATION/SEPARATION ☒ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

CURRENT STATUS:

COST CENTER: 0018000306

EMPLOYEE NAME: April Dugan

ID #: 10001760 ⁰⁴⁸⁶

BUREAU: Enforcement DIVISION: District 3 SECTION: Section 6

UNIT: Squad 6E POSITION/TITLE: Patrol Deputy

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: *Maj. W. B. Stuch*

DATE: 02/20/01

PROPOSED STATUS:

COST CENTER: 0018000320

BUREAU: Enforcement DIVISION: District 3 SECTION: Special Enforcement

UNIT: COPS Task Force POSITION/TITLE: COPS Deputy

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: *Maj. W. B. Stuch*

DATE: 02/20/01

REQUIRES:

UNIFORMS/EQUIPMENT: YES ☒ NO ☐ If YES, complete FORM # 00-079VEHICLE: YES ☒ NO ☐ If YES, complete FORM # 00-078RADIO: YES ☒ NO ☐ If YES, complete FORM # 91-068COMPUTER ACCESS: YES ☒ NO ☐ If YES, complete FORM # 91-092TRANSFER OF ASSET/INVENTORY: YES ☒ NO ☐ If YES, complete FORM # 00-073

For Personnel Use Only: Cost Center: 18320 Pay Class: 400 Job Code: 4000 Salary Step: N/C

Hourly Rate: N/C Pay Grade: N/C Review Date: N/C AA Code: WHTF

DOB: N/C Annual: N/C Sch. Hrs: 86.0 Retirement Plan: HB

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April Dugan

ID #: 1000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)



1st



2nd



3rd

NEW SUPERVISOR (Name & Rank) Lt. D. Brown/Sgt. Marty Stanley

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

1. _____

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Manatee County Sheriff's Department
Personnel Action

Employee Name: DUGAN, APRIL M

Date Processed: 04/18/2001

Employee Number: 10000486

Soc. Sec. Number:

Department: 0018000320

Present Hourly Rate: \$11.78

Present Pay Range and Step: 0018000320/ / /400/4000 / 3-4

Date of Hire: 05/05/1997

Review Date: 05/05/01

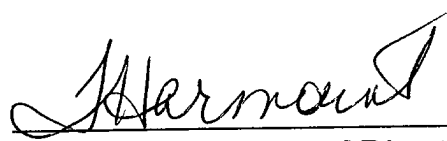
Next Review: (5/5/02)

Date of Rate Change: (4/24/01)

New Pay Range and Step: (4-5)

) New Hourly Rate: (12.13)

(☒) Approved 4/27/01
Date


Fiscal Director



SEP 26 2001



PERSONNEL ACTION INFORMATION SHEET PERSONNEL SECTION

EFFECTIVE DATE: 10/02/01

CHECK APPLICABLE BOX

☐ NEW EMPLOYEE ☐ PROMOTION ☒ TRANSFER ☐ RETIREMENT
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

CURRENT STATUS:

COST CENTER: 18320

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

BUREAU: Enforcement DIVISION: District 3 SECTION: Special Enforcement

UNIT: COPS Task Force (Temp.) POSITION/TITLE: COPS Deputy

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Maj. W. B. Stuch DATE: 09/25/01

PROPOSED STATUS:

COST CENTER: 18306

BUREAU: Enforcement DIVISION: District 3 SECTION: Section 6

UNIT: Squad 6E POSITION/TITLE: Patrol Deputy

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Maj. W. B. Stuch DATE: 09/25/01

REQUIRES:

UNIFORMS/EQUIPMENT: YES ☒ NO ☐ If YES, complete FORM # 00-079VEHICLE: YES ☒ NO ☐ If YES, complete FORM # 00-078RADIO: YES ☒ NO ☐ If YES, complete FORM # 91-068COMPUTER ACCESS: YES ☒ NO ☐ If YES, complete FORM # 91-092TRANSFER OF ASSET/INVENTORY: YES ☐ NO ☒ If YES, complete FORM # 00-073

For Personnel Use Only: Cost Center: 18306 Pay Class: N/C Job Code: N/C Salary Step: N/C

Hourly Rate: N/C Pay Grade: N/C Review Date: N/C AA Code: N/C

DOB: N/C Annual: N/C Sch. Hrs: N/C Retirement Plan: N/C

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)

☐

1st

☐

2nd

☒

3rd

NEW SUPERVISOR (Name & Rank) Lt. G. Stroup, Jr./Sgt. D. Townsend/Sgt. M. DeCesare

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

1. _____

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MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

RECEIVED



OCT 23 2001

EFFECTIVE DATE: 10/23/01

CHECK APPLICABLE BOX PERSONNEL SECTION

☐ NEW EMPLOYEE ☐ PROMOTION ☒ TRANSFER ☐ RETIREMENT
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

CURRENT STATUS:

COST CENTER: 18306

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

BUREAU: Enforcement DIVISION: District 3 SECTION: Section 6

UNIT: Squad 6E POSITION/TITLE: Patrol Deputy

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Maj. W. B. Stubb DATE: 10/19/01

PROPOSED STATUS:

COST CENTER: 16250

BUREAU: Investigative DIVISION: CID SECTION: Property Crimes

UNIT: Burglary POSITION/TITLE: Burglary Detective

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Mr. Callahan DATE: 10/19/01

REQUIRES:

UNIFORMS/EQUIPMENT: YES ☒ NO ☐ If YES, complete FORM # 00-079

VEHICLE: YES ☒ NO ☐ If YES, complete FORM # 00-078

RADIO: YES ☒ NO ☐ If YES, complete FORM # 91-068

COMPUTER ACCESS: YES ☒ NO ☐ If YES, complete FORM # 91-092

TRANSFER OF ASSET/INVENTORY: YES ☒ NO ☐ If YES, complete FORM # 00-073

For Personnel Use Only: Cost Center: 16250 Pay Class: N/C Job Code: N/C Salary Step: N/C

Hourly Rate: N/C Pay Grade: N/C Review Date: N/C AA Code: N/C

DOB: N/C Annual: N/C Sch. Hrs: N/C Retirement Plan: N/C

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)



1st



2nd



3rd

NEW SUPERVISOR (Name & Rank) Lt. D. Kaufman/Sgt. P. Rampone

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

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MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

RECEIVED

APR 17 2002



PERSONNEL SECTION

EFFECTIVE DATE: 04/23/02

CHECK APPLICABLE BOX

☐ NEW EMPLOYEE ☐ PROMOTION ☒ TRANSFER ☐ RETIREMENT
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

CURRENT STATUS:

COST CENTER: 16250

EMPLOYEE NAME: April M. Dugan ID #: 10000486

BUREAU: Investigative DIVISION: CID SECTION: Property Crimes

UNIT: Burglary POSITION/TITLE: Burglary Detective

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: [Signature] DATE: 4/3/02

PROPOSED STATUS:

COST CENTER: 16450

BUREAU: Investigative DIVISION: CPID SECTION: Child Protection Investigation

UNIT: Crimes Against Children POSITION/TITLE: Crimes Against Juveniles Detective

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: [Signature] DATE: 4/3/02

REQUIRES:

UNIFORMS/EQUIPMENT: YES ☒ NO ☐ If YES, complete FORM # 00-079

VEHICLE: YES ☒ NO ☐ If YES, complete FORM # 00-078

RADIO: YES ☒ NO ☐ If YES, complete FORM # 91-068

COMPUTER ACCESS: YES ☒ NO ☐ If YES, complete FORM # 91-092

TRANSFER OF ASSET/INVENTORY: YES ☒ NO ☐ If YES, complete FORM # 00-073

For Personnel Use Only: Cost Center: 16450 Pay Class: N/C Job Code: N/C Salary Step: N/C

Hourly Rate: N/C Pay Grade: N/C Review Date: N/C AA Code: N/C

DOB: N/C Annual: N/C Sch. Hrs: N/C Retirement Plan: N/C

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)



1st



2nd



3rd

NEW SUPERVISOR (Name & Rank) Sgt. A. Thurman

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

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Manatee County Sheriff's Department
Personnel Action

Employee Name: DUGAN, APRIL M

Date Processed: 04/25/2002

Employee Number: 10000486

Soc. Sec. Number:

Department: 0016000250

Present Hourly Rate: \$12.13

Present Pay Range and Step: 0016000250 / / 400/4000 / 4-5

Date of Hire: 5/5/1997

Review Date: 05/05/02

Next Review: (5/5/03)

Date of Rate Change: (4/23/02)

New Pay Range and Step: (5-6

) **New Hourly Rate:** (12.50)

(☒) **Approved**

4/25/02
Date

J. Harmond

Fiscal Director

**PERSONNEL ACTION INFORMATION SHEET**

PERSONNEL SECTION

EFFECTIVE DATE: October 7, 2003**CHECK APPLICABLE BOX**

☐ NEW EMPLOYEE ☒ PROMOTION ☐ TRANSFER ☐ RETIREMENT
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

CURRENT STATUS:COST CENTER: 0016000450EMPLOYEE NAME: April DuganID #: 10000486BUREAU: Investigative DIVISION: Child Protection Inv. SECTION: Child ProtectionUNIT: Crimes Against Children POSITION/TITLE: DeputyBUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: [Signature] DATE: 10/13/03**PROPOSED STATUS:**COST CENTER: 0016000450BUREAU: Investigative DIVISION: Child Protection Inv. SECTION: Child ProtectionUNIT: Crimes Against Children POSITION/TITLE: Deputy Second ClassBUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: [Signature] DATE: 10/13/03**REQUIRES:**UNIFORMS/EQUIPMENT: YES ☐ NO ☒ If YES, complete **FORM # 00-079**VEHICLE: YES ☐ NO ☒ If YES, complete **FORM # 00-078**RADIO: YES ☐ NO ☒ If YES, complete **FORM # 91-068**COMPUTER ACCESS: YES ☐ NO ☒ If YES, complete **FORM # 91-092**TRANSFER OF ASSET/INVENTORY: YES ☐ NO ☒ If YES, complete **FORM # 00-073****For Personnel Use Only:**Cost Center: 16450 Pay Class: 400 Job Code: 4020 Salary Step: 6-7Hourly Rate: \$17.17 Pay Grade: 301 Review Date: 10/07/04 AA Code: N/CDOB: N/C Annual: \$38,392.12 Sch. Hrs: N/C Retirement Plan: N/C

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)

☐

1st

☐

2nd

☐

3rd

NEW SUPERVISOR (Name & Rank) No Changes From previous

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

1. _____

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MEMORANDUM

RECEIVED
OCT 28 2003
PERSONNEL SECTION

TO: Detective April Dugan
Child Protection Services Division

FROM: Charles B. Wells, Sheriff

DATE: October 28, 2003

SUBJECT: Promotion

This is to advise effective Tuesday, October 7, 2003, you are promoted to the rank of Deputy 2nd Class. Congratulations!

CBW/clt

cc: ☒ Personnel

**PERSONNEL ACTION INFORMATION SHEET**EFFECTIVE DATE: 02-09-04**CHECK APPLICABLE BOX**

☐ NEW EMPLOYEE ☐ PROMOTION ☐ TRANSFER ☐ RETIREMENT ☐ VOLUNTEER
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☒ OTHER

CURRENT STATUS:COST CENTER: 16450NAME: (Employee/Volunteer) APRIL M. DUGANID #: 10000486BUREAU: SPECIAL TEAMS

DIVISION: _____

SECTION: _____

UNIT: _____

POSITION/TITLE: APPOINTMENT TO MOUNTED PATROL

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: _____

DATE: 02-13-04**PROPOSED STATUS:**

COST CENTER: _____

BUREAU: _____

DIVISION: _____

SECTION: _____

UNIT: _____

POSITION/TITLE: _____

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: _____

DATE: _____

REQUIRES:UNIFORMS/EQUIPMENT: YES ☐ NO ☐ If YES, complete **FORM # 00-079**VEHICLE: YES ☐ NO ☐ If YES, complete **FORM # 00-078**RADIO: YES ☐ NO ☐ If YES, complete **FORM # 91-068**COMPUTER ACCESS: YES ☐ NO ☐ If YES, complete **FORM # 91-092**TRANSFER OF ASSET/INVENTORY: YES ☐ NO ☐ If YES, complete **FORM # 00-073****For Personnel Use Only:**Cost Center: 16450Pay Class: N/CJob Code: N/CSalary Step: N/CHourly Rate: N/CPay Grade: N/CReview Date: N/CAA Code: N/CDOB: N/CAnnual: N/CSch. Hrs: N/CRetirement Plan: N/C



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 721-6753
Administrative/Executive (941) 749-5401

RECEIVED

FEB 13 2004

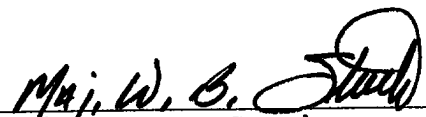
PERSONNEL SECTION

PERSONNEL ORDER

NUMBER: ENF PO #04-05
TO: Detective April Dugan
FROM: Major W. B. Steube
Chief, Enforcement Bureau
DATE: February 12, 2004
SUBJECT: **APPOINTMENT**
EFFECTIVE DATE: **February 10, 2004**

Effective Tuesday, February 10, 2004, you are appointed to the Mounted Patrol.

Please contact Lieutenant William Dixon for your assignment.


Major W. B. Steube
Chief, Enforcement Bureau

WBS/jl

cc: Sheriff Wells
Colonel Pearson
Major Shingledecker
Captain Ministral
Lieutenant Dixon
Lieutenant Dummer
Sergeant Norris

Personnel
Communications
Purchasing & Supply
Training
Fiscal Management
Accreditation



MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET



EFFECTIVE DATE: 05-31-04

CHECK APPLICABLE BOX

☐ NEW EMPLOYEE ☐ PROMOTION ☐ TRANSFER ☐ RETIREMENT ☐ VOLUNTEER
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☒ OTHER

CURRENT STATUS:

COST CENTER: 16450

NAME: (Employee/Volunteer) APRIL M. DUGAN ID #: 10000486

BUREAU: N/A DIVISION: N/A SECTION: N/A

UNIT: N/A POSITION/TITLE: MEMBER OF MOUNTED PATROL

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: _____ DATE: _____

PROPOSED STATUS:

COST CENTER: 16450

BUREAU: N/A DIVISION: N/A SECTION: N/A

UNIT: N/A POSITION/TITLE: RESIGNATION FROM MOUNTED PATROL

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Eugene A. Leonard DATE: 06-09-04

REQUIRES:

UNIFORMS/EQUIPMENT: YES ☐ NO ☐ If YES, complete **FORM # 00-079**

VEHICLE: YES ☐ NO ☐ If YES, complete **FORM # 00-078**

RADIO: YES ☐ NO ☐ If YES, complete **FORM # 91-068**

COMPUTER ACCESS: YES ☐ NO ☐ If YES, complete **FORM # 91-092**

TRANSFER OF ASSET/INVENTORY: YES ☐ NO ☐ If YES, complete **FORM # 00-073**

For Personnel Use Only: Cost Center: 16450 Pay Class: N/A Job Code: N/A Salary Step: N/A

Hourly Rate: N/A Pay Grade: N/A Review Date: N/A AA Code: N/A

DOB: N/A Annual: N/A Sch. Hrs: N/A Retirement Plan: N/A



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 721-6753
Administrative/Executive (941) 749-5401

PERSONNEL ORDER

RECEIVED

JUN 09 2004

PERSONNEL SECTION

NUMBER: ENF PO #04-41
TO: Deputy April Dugan
FROM: Major W. B. Steube
Chief, Enforcement Bureau
DATE: June 8, 2004
SUBJECT: RESIGNATION
EFFECTIVE DATE: May 31, 2004

Effective Monday, May 31, 2004, your resignation from the Mounted Patrol is accepted.

All issued equipment is to be turned into Purchasing and Supply.

Thank you for your time and dedication while serving as a member of this Special Team.

Major W. B. Steube jcl
Major W. B. Steube
Chief, Enforcement Bureau

WBS/jl

cc: Sheriff Wells
Colonel Pearson
Major Shingledecker
Captain Dixon
Captain Ministral
Lieutenant Dummer
Sergeant Norris
Sergeant Shear

Personnel
Communications
Fiscal Management
Purchasing & Supply
Accreditation
Training

An Accredited Agency



MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL ACTION INFORMATION SHEET

RECEIVED

JUL 15 2004



PERSONNEL SECTION

EFFECTIVE DATE: 08/24/04

CHECK APPLICABLE BOX

☐ NEW EMPLOYEE ☐ PROMOTION ☒ TRANSFER ☐ RETIREMENT ☐ VOLUNTEER
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

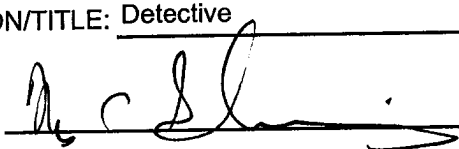
CURRENT STATUS:

COST CENTER: 16402

NAME: (Employee/Volunteer) April M. Dugan ID #: 10000486

BUREAU: Investigative DIVISION: CPID SECTION: Child Protection

UNIT: Crimes Against Children POSITION/TITLE: Detective

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE:  DATE: 07/14/04

PROPOSED STATUS:

COST CENTER: 16352

BUREAU: Investigative DIVISION: Criminal Investigation SECTION: Property Crimes

UNIT: Burglary POSITION/TITLE: Detective

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE:  DATE: 07/14/04

REQUIRES:

UNIFORMS/EQUIPMENT: YES ☒ NO ☐ If YES, complete FORM # 00-079VEHICLE: YES ☒ NO ☐ If YES, complete FORM # 00-078RADIO: YES ☒ NO ☐ If YES, complete FORM # 91-068COMPUTER ACCESS: YES ☒ NO ☐ If YES, complete FORM # 91-092TRANSFER OF ASSET/INVENTORY: YES ☒ NO ☐ If YES, complete FORM # 00-073

For Personnel Use Only: Cost Center: 16352 Pay Class: N/C Job Code: N/C Salary Step: —

Hourly Rate: N/C Pay Grade: N/C Review Date: N/C AA Code: N/C

DOB: N/C Annual: N/C Sch. Hrs: N/C Retirement Plan: N/C

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)



1st



2nd



3rd

NEW SUPERVISOR (Name & Rank) Lt. W. Vitaoli/Sgt. K. Huff

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

- | | |
|----------|-----------|
| 1. _____ | 7. _____ |
| 2. _____ | 8. _____ |
| 3. _____ | 9. _____ |
| 4. _____ | 10. _____ |
| 5. _____ | 11. _____ |
| 6. _____ | 12. _____ |

**Manatee County Sheriff's Department
Personnel Action**

10/07/2004
C. J. [illegible]
[illegible]

Employee Name: DUGAN, APRIL M

Date Processed: 10/07/2004

Employee Number: 10000486

Soc. Sec. Number:

Department: 16352

Present Hourly Rate: 17.07

Present Pay Range and Step: DEP/301/6-7

Date of Hire: 5/5/1997

Review Date: 10/01/2004

Next Review: (10/01/05)

Date of Rate Change: (10/05/2004)

New Hourly Rate: (18.28)

() Approved _____
Date

Fiscal Director



MANATEE COUNTY SHERIFF'S OFFICE

**PERSONNEL ACTION INFORMATION SHEET**EFFECTIVE DATE: 03-29-05**CHECK APPLICABLE BOX**

☐ NEW EMPLOYEE ☐ PROMOTION ☐ TRANSFER ☐ RETIREMENT ☐ VOLUNTEER
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☒ OTHER

CURRENT STATUS:COST CENTER: 16352NAME: (Employee/Volunteer) APRIL M. DUGAN ID #: 10000486

BUREAU: _____ DIVISION: _____ SECTION: _____

UNIT: _____ POSITION/TITLE: _____

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: _____ DATE: _____

PROPOSED STATUS:COST CENTER: 16352BUREAU: SPECIAL TEAM DIVISION: _____ SECTION: _____UNIT: _____ POSITION/TITLE: APPOINTMENT AS MEMBER OF CERT/TACTBUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: *[Signature]* DATE: 04-04-05**REQUIRES:**UNIFORMS/EQUIPMENT: YES ☐ NO ☐ If YES, complete **FORM # 00-079**VEHICLE: YES ☐ NO ☐ If YES, complete **FORM # 00-078**RADIO: YES ☐ NO ☐ If YES, complete **FORM # 91-068**COMPUTER ACCESS: YES ☐ NO ☐ If YES, complete **FORM # 91-092**TRANSFER OF ASSET/INVENTORY: YES ☐ NO ☐ If YES, complete **FORM # 00-073****For Personnel Use Only:** Cost Center: 16352 Pay Class: N/C Job Code: N/C Salary Step: N/CHourly Rate: N/C Pay Grade: N/C Review Date: N/C AA Code: N/CDOB: N/C Annual: N/C Sch. Hrs: N/C Retirement Plan: N/CRehire? ☐ Yes ☐ No



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 721-6753
Administrative/Executive (941) 749-5401


16352-1000486
PERSONNEL ORDER

RECEIVED
APR 01 2005
PERSONNEL

NUMBER: ENF PO #05-30
TO: Detective April M. Dugan
FROM: Major John C. Hagaman
Chief, Enforcement Bureau
DATE: March 30, 2005
SUBJECT: **APPOINTMENT**
EFFECTIVE DATE: **March 29, 2005**

Effective Tuesday, March 29, 2005, you are appointed to the
CERT/TACT Team.

Please contact Lieutenant Robert Sanchez for your assignment.


Major John C. Hagaman
Chief, Enforcement Bureau

JCH/jl

cc: Sheriff Wells
Colonel Steube
Major Shingledecker
Captain Kaufman
Lieutenant Sanchez
Lieutenant Vitiaoli
Sergeant Huff

Purchasing & Supply
Accreditation
Communications
Fiscal Management
Training
Personnel



MANATEE COUNTY SHERIFF'S OFFICE

PERSONNEL ACTION INFORMATION SHEET

RECEIVED
MAY 25 2005
PERSONNEL

EFFECTIVE DATE: 06/14/2005

CHECK APPLICABLE BOX

☐ NEW EMPLOYEE ☐ PROMOTION ☒ TRANSFER ☐ RETIREMENT ☐ VOLUNTEER
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

CURRENT STATUS:

COST CENTER: 16352

NAME: (Employee/Volunteer) April M. Dugan ID #: 10000486

BUREAU: Investigative DIVISION: Criminal Investigation SECTION: Property Crimes

UNIT: Burglary POSITION/TITLE: Detective

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: [Signature] DATE: 05/23/2005

PROPOSED STATUS: PLACE ON PROBATION? (Must answer Yes or No) No COST CENTER: 18306

BUREAU: Enforcement DIVISION: District 3 SECTION: Section 6

UNIT: Squad 6W POSITION/TITLE: Patrol Deputy

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Col. W. B. [Signature] DATE: 05/23/2005

REQUIRES:

UNIFORMS/EQUIPMENT: YES ☒ NO ☐ If YES, complete FORM # 00-079VEHICLE: YES ☒ NO ☐ If YES, complete FORM # 00-078RADIO: YES ☒ NO ☐ If YES, complete FORM # 91-068COMPUTER ACCESS: YES ☒ NO ☐ If YES, complete FORM # 91-092TRANSFER OF ASSET/INVENTORY: YES ☒ NO ☐ If YES, complete FORM # 00-073

For Personnel Use Only: Cost Center: 18306 Pay Class: MC Job Code: MC Salary Step: -

Hourly Rate: MC Pay Grade: MC Review Date: MC AA Code: MC

DOB: MC Annual: MC Sch. Hrs: MC Retirement Plan: MC

Rehire? ☐ Yes ☐ No

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)

☐

1st

☐

2nd

☒

3rd

NEW SUPERVISOR (Name & Rank) Lt. A. Carr/Sgt. J. Powell

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

- | | |
|----------|-----------|
| 1. _____ | 7. _____ |
| 2. _____ | 8. _____ |
| 3. _____ | 9. _____ |
| 4. _____ | 10. _____ |
| 5. _____ | 11. _____ |
| 6. _____ | 12. _____ |

**Manatee County Sheriff's Department
Personnel Action**

Employee Name: DUGAN, APRIL M

Date Processed: 10/17/2005

Employee Number: 10000486

Soc. Sec. Number:

Department: 18306

Present Hourly Rate: 18.28

Present Pay Range and Step: DEP/301/6-7

Date of Hire: 5/5/1997

Review Date: 10/01/2005

Next Review: (10/01/06)

Date of Rate Change: (10/04/2005)

New Hourly Rate: (19.01)

Comment: This action is the result of the Annual Pay Increase

() Approved _____

Date

Fiscal Director

**PERSONNEL ACTION INFORMATION SHEET**

RECEIVED

JAN - 6 2006

PERSONNEL

EFFECTIVE DATE: 01/10/2006

CHECK APPLICABLE BOX

☐ NEW EMPLOYEE ☐ PROMOTION ☒ TRANSFER ☐ RETIREMENT ☐ VOLUNTEER
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

CURRENT STATUS:

COST CENTER: 18306

NAME: (Employee/Volunteer) April M. Dugan ID #: 10000486

BUREAU: Enforcement DIVISION: District 3 SECTION: Section 6

UNIT: Squad 6W POSITION/TITLE: Patrol Deputy

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Col. W. B. Stund DATE: 12/29/2005

PROPOSED STATUS: PLACE ON PROBATION? (Must answer Yes or No) No COST CENTER: 18304

BUREAU: Enforcement DIVISION: District 3 SECTION: Section 4

UNIT: Squad 4E POSITION/TITLE: Patrol Deputy

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Col. W. B. Stund DATE: 12/29/2005

REQUIRES:UNIFORMS/EQUIPMENT: YES ☒ NO ☐ If YES, complete FORM # 00-079VEHICLE: YES ☒ NO ☐ If YES, complete FORM # 00-078RADIO: YES ☒ NO ☐ If YES, complete FORM # 91-068COMPUTER ACCESS: YES ☒ NO ☐ If YES, complete FORM # 91-092TRANSFER OF ASSET/INVENTORY: YES ☐ NO ☒ If YES, complete FORM # 00-073**For Personnel Use Only:** Cost Center: 18304 Pay Class: — Job Code: — Salary Step: —

Hourly Rate: — Pay Grade: — Review Date: — AA Code: —

DOB: — Annual: — Sch. Hrs: — Retirement Plan: —

Rehire? ☐ Yes ☐ No

PERSONNEL ACTION INFORMATION SHEETEMPLOYEE NAME: April M. DuganID #: 10000486**PROPOSED STATUS:**

NEW SHIFT ASSIGNMENT (Check One)

☐

1st

☒

2nd

☐

3rd

NEW SUPERVISOR (Name & Rank) Sgt. S. Felton/Sgt. J. Perez

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

- | | |
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| 1. _____ | 7. _____ |
| 2. _____ | 8. _____ |
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**Manatee County Sheriff's Department
Personnel Action**

Employee Name: DUGAN, APRIL M

Date Processed: 12/01/2006

Employee Number: 10000486

Soc. Sec. Number:

Department: 18304

Present Pay Range and Step: DEP/301/6-7

Date of Hire: 5/5/1997

Review Date: 10/01/2006

Next Review: (10/01/07)

Date of Rate Change: (10/03/2006)

Comment: This action is the result of the Annual Pay Increase

Prior Hourly Rate: \$19.01

New Hourly Rate: \$19.96



MANATEE COUNTY SHERIFF'S OFFICE



PERSONNEL ACTION INFORMATION SHEET

EFFECTIVE DATE: 01/8/07

CHECK APPLICABLE BOX

☐ NEW EMPLOYEE ☐ PROMOTION ☐ TRANSFER ☐ RETIREMENT ☐ VOLUNTEER
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☒ OTHER

CURRENT STATUS:

COST CENTER: N/A

NAME: (Employee/Volunteer) April Dugan ID #: 10000486

BUREAU: DIVISION: SECTION:

UNIT: Special Teams POSITION/TITLE: CERT/TACT Team

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: [Signature] DATE: 1/04/07

PROPOSED STATUS: PLACE ON PROBATION? (Must answer Yes or No) No COST CENTER: N/A

BUREAU: DIVISION: SECTION:

UNIT: POSITION/TITLE: Removal

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: [Signature] DATE: 1/04/07

REQUIRES:

UNIFORMS/EQUIPMENT: YES ☐ NO ☐ If YES, complete FORM # 00-079VEHICLE: YES ☐ NO ☐ If YES, complete FORM # 00-078RADIO: YES ☐ NO ☐ If YES, complete FORM # 91-068COMPUTER ACCESS: YES ☐ NO ☐ If YES, complete FORM # 91-092TRANSFER OF ASSET/INVENTORY: YES ☐ NO ☐ If YES, complete FORM # 00-073

For Personnel Use Only: Cost Center: Pay Class: Job Code: MC Salary Step:

Hourly Rate: Pay Grade: Review Date: AA Code:

DOB: Annual: Sch. Hrs: Retirement Plan:

Rehire? ☐ Yes ☐ No

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)

☐

1st

☐

2nd

☐

3rd

NEW SUPERVISOR (Name & Rank) _____

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

1. cc: Sheriff Wells
2. Colonel Steube
3. Major Hagaman
4. Captain Couch
5. Lieutenant Baroncelli
6. Lieutenant Sanchez

7. Sergeant Felton
8. Personnel
9. Communications
10. Fiscal/Purchasing
11. Accreditation
12. Training



MANATEE COUNTY SHERIFF'S OFFICE

**PERSONNEL ACTION INFORMATION SHEET**EFFECTIVE DATE: 01/23/2007**CHECK APPLICABLE BOX**

☐ NEW EMPLOYEE ☐ PROMOTION ☒ TRANSFER ☐ RETIREMENT ☐ VOLUNTEER
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

CURRENT STATUS:COST CENTER: 18304NAME: (Employee/Volunteer) April M. Dugan ID #: 10000486BUREAU: Enforcement DIVISION: District 3 SECTION: Section 4UNIT: Squad 4E POSITION/TITLE: Patrol DeputyBUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Col. W. B. [Signature] DATE: 12/28/2006PROPOSED STATUS: PLACE ON PROBATION? (Must answer Yes or No) No COST CENTER: 18201BUREAU: Enforcement DIVISION: District 2 SECTION: Section 1UNIT: Squad 1E POSITION/TITLE: Patrol DeputyBUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Col. W. B. [Signature] DATE: 12/28/2006**REQUIRES:**UNIFORMS/EQUIPMENT: YES ☐ NO ☐ If YES, complete FORM # 00-079VEHICLE: YES ☐ NO ☐ If YES, complete FORM # 00-078RADIO: YES ☐ NO ☐ If YES, complete FORM # 91-068COMPUTER ACCESS: YES ☐ NO ☐ If YES, complete FORM # 91-092TRANSFER OF ASSET/INVENTORY: YES ☐ NO ☐ If YES, complete FORM # 00-073**RECEIVED**

JAN 18 2007

PERSONNEL**For Personnel Use Only:** Cost Center: 18201 Pay Class: — Job Code: MC Salary Step: —Hourly Rate: — Pay Grade: — Review Date: — AA Code: —DOB: — Annual: — Sch. Hrs: — Retirement Plan: —Rehire? ☐ Yes ☐ No

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)



1st



2nd



3rd

NEW SUPERVISOR (Name & Rank) Sgts. F. Liedke/K. Noordzy

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

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MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

RECEIVED

JUL 16 2007

EFFECTIVE DATE: 07/10/2007

CHECK APPLICABLE BOX

PERSONNEL

☐ NEW EMPLOYEE ☐ PROMOTION ☒ TRANSFER ☐ RETIREMENT ☐ VOLUNTEER
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

CURRENT STATUS:

COST CENTER: 18201

NAME: (Employee/Volunteer) April M. Dugan ID #: 10000486

BUREAU: Enforcement DIVISION: District 2 SECTION: Section 1

UNIT: Squad 1E POSITION/TITLE: Patrol Deputy

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Dennis P. Dummer DATE: 06/29/2007

PROPOSED STATUS: PLACE ON PROBATION? (Must answer Yes or No) No COST CENTER: 18301

BUREAU: Enforcement DIVISION: District 3 SECTION: Section 1

UNIT: Squad 1E POSITION/TITLE: Patrol Deputy

BUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: Dennis P. Dummer DATE: 06/29/2007

REQUIRES:

UNIFORMS/EQUIPMENT: YES ☐ NO ☐ If YES, complete FORM # 00-079

VEHICLE: YES ☐ NO ☐ If YES, complete FORM # 00-078

RADIO: YES ☐ NO ☐ If YES, complete FORM # 91-068

COMPUTER ACCESS: YES ☐ NO ☐ If YES, complete FORM # 91-092

TRANSFER OF ASSET/INVENTORY: YES ☐ NO ☐ If YES, complete FORM # 00-073

For Personnel Use Only: Cost Center: 18301 Pay Class: 400 Job Code: Salary Step:

Hourly Rate: Pay Grade: Review Date: AA Code:

DOB: Annual: Sch. Hrs: Retirement Plan:

Rehire? ☐ Yes ☐ No

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)



1st



2nd



3rd

NEW SUPERVISOR (Name & Rank) Sgt. D. Turner

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

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| 1. _____ | 7. _____ |
| 2. _____ | 8. _____ |
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| 6. _____ | 12. _____ |

Manatee County Sheriff's Department

Personnel Action

Employee Name: DUGAN, APRIL M

Date Processed: 10/08/2007

Employee Number: 10000486

Soc. Sec. Number:

Department: 18301

Present Pay Range and Step: DEP/301/6-7

Date of Hire: 5/5/1997

Review Date: 10/01/2007

Next Review: (10/01/08)

Date of Rate Change: (10/02/2007)

Comment: This action is the result of the Annual Pay Increase

Prior Hourly Rate: \$19.96

New Hourly Rate: \$20.51

**PERSONNEL ACTION INFORMATION SHEET**EFFECTIVE DATE: 06/24/2008**CHECK APPLICABLE BOX**

☐ NEW EMPLOYEE ☐ PROMOTION ☒ TRANSFER ☐ RETIREMENT ☐ VOLUNTEER
☐ RESIGNATION/SEPARATION ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS ☐ OTHER

CURRENT STATUS:COST CENTER: 18301NAME: (Employee/Volunteer) April M. Dugan ID #: 10000486BUREAU: Enforcement DIVISION: District 3 SECTION: Section 1UNIT: Squad 1E POSITION/TITLE: Patrol DeputyBUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: [Signature] DATE: 06/11/2008**PROPOSED STATUS:** PLACE ON PROBATION? (Must answer Yes or No) Yes COST CENTER: 16402BUREAU: Investigative DIVISION: CPID SECTION: Child ProtectionUNIT: Crimes Against Children POSITION/TITLE: DetectiveBUREAU CHIEF/PERSONNEL DIRECTOR SIGNATURE: [Signature] DATE: 06/11/2008**REQUIRES:**UNIFORMS/EQUIPMENT: YES ☒ NO ☐ If YES, complete **FORM # 00-079**VEHICLE: YES ☒ NO ☐ If YES, complete **FORM # 00-078**RADIO: YES ☒ NO ☐ If YES, complete **FORM # 91-068**COMPUTER ACCESS: YES ☒ NO ☐ If YES, complete **FORM # 91-092**TRANSFER OF ASSET/INVENTORY: YES ☒ NO ☐ If YES, complete **FORM # 00-073****For Personnel Use Only:** Cost Center: 16402 Pay Class: — Job Code: Mc Salary Step: —Hourly Rate: — Pay Grade: — Review Date: — AA Code: —DOB: — Annual: — Sch. Hrs: — Retirement Plan: —Rehire? ☐ Yes ☐ No

✓

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)



1st



2nd



3rd

NEW SUPERVISOR (Name & Rank) Sgt. P. Spear

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

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| 1. _____ | 7. _____ |
| 2. _____ | 8. _____ |
| 3. _____ | 9. _____ |
| 4. _____ | 10. _____ |
| 5. _____ | 11. _____ |
| 6. _____ | 12. _____ |

**PERSONNEL ACTION INFORMATION SHEET**EFFECTIVE DATE: 08/15/2010CHECK APPLICABLE BOX

☐ NEW EMPLOYEE REHIRE? ☐ YES ☐ NO ☐ VOLUNTEER
☒ TRANSFER ☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS
☐ PROMOTION ☐ DEMOTION ☐ RETIREMENT ☐ RESIGNATION
☐ SEPARATION ☐ TERMINATION ☐ OTHER _____

CURRENT STATUS: ID #: 10000486 COST CENTER: 16402NAME: (Employee/Volunteer) April M. DuganBUREAU: Investigative DIVISION: CPID SECTION: Child ProtectionUNIT: Crimes Against Children POSITION/TITLE: LE DetectiveBUREAU CHIEF / HR DIRECTOR SIGNATURE: [Signature] DATE: 08/04/2010**PROPOSED STATUS:**PLACE ON PROBATION? ☐ YES ☒ NO ☐ DO NOT EXTEND COST CENTER: 18206BUREAU: Enforcement DIVISION: District 2 SECTION: Section 6UNIT: Squad 6W POSITION/TITLE: LE DeputyBUREAU CHIEF / HR DIRECTOR SIGNATURE: Dennis P. Dummer DATE: 08/04/2010**REQUIRES:**

UNIFORMS/EQUIPMENT: ☐ YES ☐ NO If YES, complete FORM # 00-079
VEHICLE: ☐ YES ☐ NO If YES, complete FORM # 00-078
RADIO: ☐ YES ☐ NO If YES, complete FORM # 91-068
COMPUTER ACCESS: ☐ YES ☐ NO If YES, complete FORM # 91-092
TRANSFER OF ASSET/INVENTORY: ☒ YES ☐ NO IF YES, complete FORM # 00-073

For HR Use Only:

Cost Center: 18206 Review Date: — Pay Class: — Job Code: nlc
Hourly Rate: — Annual: — Pay Grade: — Sch. Hrs: —
DOB: — AA Code: — Retirement Plan: —

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)

☐

1st

☐

2nd

☒

3rd

NEW SUPERVISOR (Name & Rank) Sgt. O. Walker

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

- | | |
|----------|-----------|
| 1. _____ | 7. _____ |
| 2. _____ | 8. _____ |
| 3. _____ | 9. _____ |
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| 5. _____ | 11. _____ |
| 6. _____ | 12. _____ |

NOTES:

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D A

RECEIVED
AUG 11 2010
PERSONNEL

TO: Detective April Dugan

FROM: Director Brian Schnering 

DATE: August 9, 2010

SUBJECT: Re-Assignment

Effective August 15, 2010, you have been reassigned to the Enforcement Bureau. You are directed to report to District 2, Squad 6 West for assignment as a Patrol Deputy. Your transfer is non-disciplinary and you will not be placed in a probationary status.

If you have any questions concerning your transfer please do not hesitate to contact me at extension 2134.

BAS:bas

CC: Colonel Hagaman
Major Shingledecker
Major Dummer
Human Resources



PERSONNEL ACTION INFORMATION SHEET

JAN 06 11

EFFECTIVE DATE: 1/16/2011

CHECK APPLICABLE BOX

PERSONNEL

☐ NEW EMPLOYEEREHIRE? ☐ YES ☐ NO☐ VOLUNTEER☒ TRANSFER☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS☐ PROMOTION☐ DEMOTION☐ RETIREMENT☐ RESIGNATION☐ SEPARATION☐ TERMINATION☐ OTHER _____

CURRENT STATUS:

ID #: 10000486

COST CENTER: 18206

NAME: (Employee/Volunteer) April M. Dugan

BUREAU: Enforcement

DIVISION: District 2

SECTION: Section 6

UNIT: Squad 6W

POSITION/TITLE: LE Deputy

BUREAU CHIEF / HR DIRECTOR SIGNATURE: _____

Dennis P. Dummer

DATE: 1/16/11

PROPOSED STATUS:

PLACE ON PROBATION?

☐ YES☒ NO☐ DO NOT EXTEND

COST CENTER: 18304

BUREAU: Enforcement

DIVISION: District 3

SECTION: Section 4

UNIT: Squad 4N

POSITION/TITLE: LE Deputy

BUREAU CHIEF / HR DIRECTOR SIGNATURE: _____

Dennis P. Dummer

DATE: 1/16/11

REQUIRES:

UNIFORMS/EQUIPMENT:

☐ YES☐ NO

If YES, complete FORM # 00-079

VEHICLE:

☐ YES☐ NO

If YES, complete FORM # 00-078

RADIO:

☐ YES☐ NO

If YES, complete FORM # 91-068

COMPUTER ACCESS:

☐ YES☐ NO

If YES, complete FORM # 91-092

TRANSFER OF ASSET/INVENTORY:

☐ YES☐ NO

If YES, complete FORM # 00-073

For HR Use Only:

Cost Center: 18304

Pay Class: _____

Pay Grade: _____

Job Code: _____

Hourly Rate: _____

Annual: _____

Review Date: _____

Sch. Hrs: _____

DOB: _____

AA Code: _____

Retirement Plan: _____

MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION INFORMATION SHEET

EMPLOYEE NAME: April M. Dugan

ID #: 10000486

PROPOSED STATUS:

NEW SHIFT ASSIGNMENT (Check One)

☐

1st

☒

2nd

☐

3rd

NEW SUPERVISOR (Name & Rank) Sergeant J. Andersen, Jr.

THIS SUPERVISOR WILL REQUIRE ACCESS TO THE FOLLOWING SUBORDINATES ELECTRONIC EVALUATION DATA:

- | | |
|----------|-----------|
| 1. _____ | 7. _____ |
| 2. _____ | 8. _____ |
| 3. _____ | 9. _____ |
| 4. _____ | 10. _____ |
| 5. _____ | 11. _____ |
| 6. _____ | 12. _____ |

NOTES:

Manatee County Sheriff's Department
Personnel Action

Employee Name: DUGAN, APRIL M

Date Processed: 10/07/2012

Employee Number: 10000486

Department: 18304

Present Pay Range and Step: SWRN/53/MN

Date of Hire: 5/5/1997

Review Date: 10/01/2012

Next Review: ()

Date of Rate Change: ()

Comment: This action is the result of the Annual Pay Increase

Prior Hourly Rate: \$20.51

New Hourly Rate: \$24.18



MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION FORM



EFFECTIVE DATE: 1-12-14

NAME: Culbreath, April M.

ID#: 10000486

Last

First

MI

CHECK APPLICABLE BOX

- ☐ NEW EMPLOYEE ☐ REHIRE
☒ TRANSFER ☐ PROMOTION
☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS
☐ OTHER _____
☐ VOLUNTEER

SEPARATION OF EMPLOYMENT

- ☐ RESIGNATION ☐ TERMINATION
☐ RETIREMENT ☐ DECEASED
☐ SEPARATION

HR USE ONLY

IA Status Verified: _____

ATMS (Form 61) Completed: _____

CURRENT STATUS

CURRENT STATUS

POSITION TITLE: LE Deputy COST CENTER: 18304

HOURLY RATE: _____

Reports to: Sgt. J. Andersen

ANNUAL RATE: _____

BUREAU: Enforcement DIVISION: Patrol D3 SECTION: Squad 4N

BUREAU CHIEF / HR DIRECTOR SIGNATURE:

Major Dennis P. Dummer

DATE: 12-17-13

PROPOSED STATUS

PROPOSED STATUS

POSITION TITLE: LE Deputy COST CENTER: 18301

Reports to: Sgt. K. Karava

BUREAU: Enforcement DIVISION: Patrol D3 SECTION: Squad 1N

Is the proposed status a supervisory position? ☐ Yes ☐ No

If Yes, list NEW subordinates:

RECEIVED

DEC 23 2013

MCSO Human Resources

PLACED ON PROBATION:

☐ Yes ☒ No DO NOT EXTEND

FIRST TIME MSO SUPERVISOR? (PMP Training)

☐ Yes ☐ No DATE: _____

BUREAU CHIEF / HR DIRECTOR SIGNATURE:

Major Dennis P. Dummer

DATE: 12-17-13

EQUIPMENT REQUIRED

- ☐ Uniforms / Equipment: (Form #00-079) ☐ Computer Access: (Form # 91-092)
☐ Vehicle: (Form # 00-078) ☐ Transfer of Asset / Inventory: (Form # 00-073)
☐ Radio: (Form # 91-068)

PAYROLL INFORMATION

JOB CODE: _____

HOURLY RATE: _____

RETIREMENT: _____

PAY GRADE: _____

ANNUAL RATE: _____

AA CODE: _____

PAY CLASS: _____

SCHEDULED HRS: _____

REVIEW DATE: _____

✓



MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION FORM

Rena H8



EFFECTIVE DATE: 6/14/2015

NAME: Culbreath, April

ID#: 10000486

Last

First

MI

CHECK APPLICABLE BOX

- ☐ NEW EMPLOYEE ☐ REHIRE
☒ TRANSFER ☐ PROMOTION
☐ TEMPORARY TRANSFER - 3 MONTHS OR LESS
☐ OTHER _____
☐ VOLUNTEER

SEPARATION OF EMPLOYMENT

- ☐ RESIGNATION ☐ TERMINATION
☐ RETIREMENT ☐ DECEASED
☐ SEPARATION

HR USE ONLY

Agents Verified

ATMS Form 9-10-2014

CURRENT STATUS

POSITION TITLE: LE Deputy COST CENTER: 18301

HOURLY RATE: _____

Reports to: Sergeant Kevin Karava

ANNUAL RATE: _____

BUREAU: Enforcement DIVISION: Patrol/D3 SECTION: Squad 1N

BUREAU CHIEF / HR DIRECTOR SIGNATURE:

[Signature]

DATE: 6/5/15

PROPOSED STATUS

POSITION TITLE: LE Detective COST CENTER: 16352

Reports to: Sergeant Karen DeVries

BUREAU: Investigative DIVISION: CID SECTION: Property (B)

Is the proposed status a supervisory position? ☐ Yes ☒ No If Yes, list NEW subordinates:

RECEIVED

JUN 08 2015

MCSO Human Resources

PLACED ON PROBATION:

☒ Yes ☐ No ☐ DO NOT EXTEND

FIRST TIME MSO SUPERVISOR? (PMP Training)

☐ Yes ☒ No DATE: _____

BUREAU CHIEF / HR DIRECTOR SIGNATURE:

[Signature]

DATE:

6/5/15

- ☒ Uniforms / Equipment: (Form #00-079)
☒ Vehicle: (Form # 00-078)
☒ Radio: (Form # 91-068)

- ☒ Computer Access: (Form # 91-092)
☒ Transfer of Asset / Inventory: (Form # 00-073)

PAYROLL INFORMATION

INSURANCE DEDUCTIONS:

☐ None ☐ Single ☐ Double

JOB CODE: _____

HOURLY RATE: _____

RETIREMENT: _____

PAY GRADE: _____

ANNUAL RATE: _____

AA CODE: _____

PAY CLASS: _____

SCHEDULED HRS: _____

REVIEW DATE: _____

Deductions Term Date: _____

CR



MANATEE COUNTY SHERIFF'S OFFICE
PERSONNEL ACTION FORM



NAME: Culbreath April EFFECTIVE DATE: 10/07/2023
Last First Middle
ID#: 10000486 TEMP./VOLUNTEER ID#:

CHECK APPLICABLE BOX

- ☐ NEW EMPLOYEE ☐ VOLUNTEER
☐ REHIRE ☐ TEMP EMPLOYEE
☐ TRANSFER ☐ DEMOTION
☐ PROMOTION ☐ PCN CHANGE
☐ STEP INCREASE
☐ OTHER

HR / PAYROLL USE ONLY:

CURRENT PCN: 64030071E ☒ OPEN ☐ INACTIVATE
CURRENT PCN: ☐ OPEN ☐ INACTIVATE
PROPOSED PCN: ☐ REMOVE OPEN ☐ ACTIVATE

SEPARATION OF EMPLOYMENT

- ☐ RESIGNATION ☒ RETIRED (AGENCY)
☐ SEPARATION ☒ RETIRED (FRS)
☐ TERMINATION ☐ DECEASED

CURRENT STATUS

POSITION TITLE: LE Detective REPORTS TO: Sergeant Jason Farrier
BUREAU: Investigative DIVISION: CID COST CENTER: 16351
SECTION: Fraud/Auto/Pawn UNIT/SQUAD: Specialized
BUREAU CHIEF SIGNATURE / HR DIRECTOR: Major Todd M. Shear DATE: 9/21/23
HOURLY RATE: \$38.57
ANNUAL RATE: \$80242.52

PROPOSED STATUS

POSITION TITLE: REPORTS TO:
BUREAU: DIVISION: COST CENTER:
SECTION: UNIT/SQUAD:
BUREAU CHIEF SIGNATURE / HR DIRECTOR: DATE:
Is the proposed status a supervisory position? ☐ Yes ☐ No If Yes, list subordinates:

RECEIVED

By Melissa Raburn at 4:12 pm, Sep 21, 2023

HR USE ONLY

PLACED ON PROBATION:

☐ Yes ☒ No ☐ DO NOT EXTEND

FIRST TIME MSO SUPERVISOR:

☐ Yes ☒ No

PAYROLL INFORMATION

JOB CODE:
PAY GRADE:
STEP:
PAY CLASS:

HOURLY RATE:
ANNUAL RATE:
SCHEDULED HRS:

RETIREMENT:
AA CODE:

SPECIAL TEAMS APPLICATION FORM
(Type or Print)DATE 2.20.99NAME Watson April Michelle
(Last) (First) (Middle)PRESENT POSITION Patrol Deputy (SSE)HOW LONG IN PRESENT POSITION? One year two monthRANK Deputy BUREAU Enforcement DIVISION PatrolSPECIAL TEAM APPLYING FOR TACT/CERTOTHER SPECIAL TEAMS THAT YOU ARE ON NONE**RECEIVED**

MAR 08 1999

PERSONNEL SECTION

Sgt. C. D. [Signature]
SERGEANT Recommend for Consideration X
DisapprovedLt. R. Walker
LIEUTENANT Recommend for Consideration X
Disapproved (a)John C. [Signature]
CAPTAIN/COMMANDER Recommend for Consideration X
DisapprovedMaj. W. B. [Signature]
MAJOR Recommend for Consideration K
DisapprovedCol. [Signature] 3-8-99
UNDERSHERIFF Recommend for Consideration ✓
DisapprovedCharles B. [Signature]
SHERIFF Recommend for Consideration ✓
DisapprovedA letter detailing your qualifications shall accompany this request.
REMARKS See Attached Memo Letter.Check here if remarks are continued X
NCSO FM 89-55

**MANATEE COUNTY SHERIFF'S OFFICE
MEMORANDUM**

TO: Sheriff C. B. Wells

THRU: Col. K. Pearson
Major W. B. Steube *WBS 03/05/99*
Captain J. C. Hagaman
Sgt. C. Gibson *CG 2-26-99 PW/2-28-99*

FROM: Deputy April Watson

DATE: February 26, 1999

SUBJECT: TACT/CERT Team

I am requesting your consideration to be placed on the TACT/CERT Team.

I am very interested in participating on this special team. I work out on a regular basis in an effort to improve my physical condition. I am very willing to be available for training and call-outs.

Thank you for your consideration.

AW/yfg



MANATEE COUNTY SHERIFF'S OFFICE

TRANSFER REQUEST



NAME April M. Watson DATE 9-10-99
PRESENT POSITION DEPUTY SHERIFF
HOW LONG IN PRESENT POSITION two years four months RANK DEPUTY
BUREAU ENFORCEMENT DIVISION PATROL SECTION/UNIT S3E
POSITION REQUESTED DELTA
BUREAU INVESTIGATIVE DIVISION DELTA SECTION/UNIT STREET LEVEL

APPROVAL PROCESS

Sgt CN Hester
Sergeant/Unit Manager

RECEIVED
SEP 15 1999
RECOMMEND FOR ☒ SEE ATTACHED ☐
PERSONNEL SECTION

LPR Walker
Section Director/Lieutenant

RECOMMEND FOR ☒ SEE ATTACHED ☐

MMB
Division Commander/Captain

RECOMMEND FOR ☐ SEE ATTACHED ☐

Maj. W. B. Stuch
Bureau Chief

RECOMMEND FOR ☒ SEE ATTACHED ☐

Col H Pearson 9/15
Sheriff

RECOMMEND FOR ☒ SEE ATTACHED ☐

A letter detailing your qualifications and stating your reason for requesting transfer shall accompany this request. Requests for transfer shall not be submitted or recommended for consideration when there are no vacancies.

**MANATEE COUNTY SHERIFF'S OFFICE
MEMORANDUM**

TO: Sheriff Charles B. Wells

THRU: Major W. B. Steube
Captain M. Mayer *mm*
Lt. R. Walker
Sgt. C. Gibson *CC 9-10-99*

FROM: Deputy April M. Watson

DATE: September 10, 1999

SUBJECT: Transfer Request

I'm hereby requesting transfer from the patrol division to the delta street level position that is currently posted.

I was hired with this agency on May 5th, 1997. I worked at the front desk/TRU, dispatch and at the JAC facility while awaiting the FTEP to begin. During my time at TRU I worked in an undercover capacity on a crack cocaine/prostitution reverse. I completed the field training program in January of 1998. I was then assigned to squad three west, zone W30, under the supervision of Sgt. Rampone and Lt. Walker. I made several narcotics related contacts and arrests during the period I worked in W30. I was switched to zone E30 in about August 1998 where I was able to make contacts and arrests on prostitution and narcotics related statute violations. I requested to move to zone E10 in October of 1999. I work in E10, where I made even more narcotics related contacts and arrests, until moving to zone E40 in June of 1999. I have worked with the delta unit, in an undercover capacity, on three separate occasions. I have taken classes through the Sheriff's Office including, but not limited to the following: INTERVIEWS & INTERROGATIONS AND THE SHOTGUN FAMILURIZATION COURSE.

I would appreciate your consideration for this position.



MANATEE COUNTY SHERIFF'S OFFICE
TRANSFER REQUEST



NAME April Watson DATE 10.19.99
PRESENT POSITION patrol Deputy
HOW LONG IN PRESENT POSITION 2 1/2 years RANK Deputy
BUREAU Enforcement DIVISION Patrol SECTION/UNIT S3E
POSITION REQUESTED C.O.P. Unit Deputy (Cobra)
BUREAU Enforcement DIVISION Patrol SECTION/UNIT S.E.U.

APPROVAL PROCESS

RECEIVED
OCT 25 1999

RECOMMEND FOR ☒ PERSONNEL FLASHED SECTION ☐

RECOMMEND FOR ☒ SEE ATTACHED ☐

RECOMMEND FOR ☒ SEE ATTACHED ☐

RECOMMEND FOR ☒ SEE ATTACHED ☐

RECOMMEND FOR ☒ SEE ATTACHED ☐

[Signature]
Sergeant/Unit Manager

[Signature]
Section Director/Lieutenant

[Signature]
Division Commander/Captain

[Signature]
Bureau Chief

[Signature]
Sheriff

A letter detailing your qualifications and stating your reason for requesting transfer shall accompany this request. Requests for transfer shall not be submitted or recommended for consideration when there are no vacancies.

MANATEE COUNTY SHERIFF'S OFFICE MEMORANDUM

TO: Sheriff Charles B. Wells

THRU: Major W. B. Steube
Captain M. Mayer
Lt. R. Walker
Sgt. S. McIver

FROM: Deputy April M. Watson

DATE: October 19, 1999

SUBJECT: Transfer Request

I'm hearby requesting transfer from the patrol division to the C.O.P. Unit Deputy position that is currently posted.

I was hired with this agency on May 5th, 1997. I worked at the front desk/TRU, dispatch and at the JAC facility while awaiting the FTEP to begin. During my time at TRU I worked in an undercover capacity with [REDACTED] on a crack cocaine/prostitution reverse. I completed the field training program in January of 1998. I was then assigned to squad three west, zone W30, under the supervision of Sgt. Rampone and Lt. Walker. I made several narcotics related contacts and arrests during the period I worked in W30. I was switched to zone E30 in about August 1998 where I was able to make contacts and arrests on prostitution and narcotics related statute violations. I requested to move to zone E10 in October of 1999. I work in E10, where I made even more narcotics related contacts and arrests, until moving to zone E40 in June of 1999. I have worked with [REDACTED] in an undercover capacity, on three separate occasions and I've assisted [REDACTED] on several other occasions, most recently with the Outer Limits NightClub search warrant. I have taken classes through the Sheriff's Office including, but not limited to the following: INTERVIEWS & INTERROGATIONS AND THE SHOTGUN FAMILURIZATION COURSE. I would appreciate your consideration for this position.

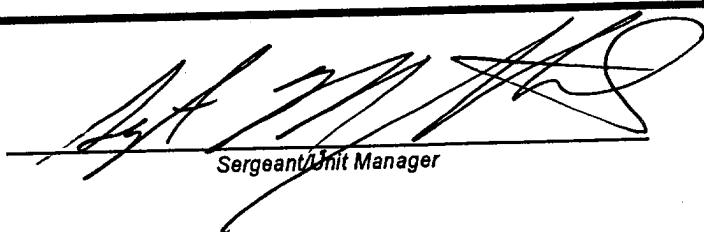


MANATEE COUNTY SHERIFF'S OFFICE TRANSFER REQUEST



NAME APRIL DUGAN DATE 5-24-01
PRESENT POSITION COPS/SEU
HOW LONG IN PRESENT POSITION TEMP POSITION THREE MONTHS RANK DEPUTY
BUREAU ENFORCEMENT DIVISION PATROL SECTION/UNIT PAT/SEU
POSITION REQUESTED DETECTIVE PROPERTY SECTION
BUREAU ADMINISTRATIVE DIVISION INVESTIGATIVE SECTION/UNIT CID/PROPERTY

APPROVAL PROCESS


Sergeant/Unit Manager

Copy Faxed to Personnel Section

RECOMMEND FOR ☒ SEE ATTACHED ☐

☐ DATE & TIME _____

RECEIVED
MAY 25 2001
PERSONNEL SECTION

Lieutenant/Section Director

RECOMMEND FOR ☐ SEE ATTACHED ☐

Captain/Division Commander

RECOMMEND FOR ☐ SEE ATTACHED ☐

Bureau Chief

RECOMMEND FOR ☐ SEE ATTACHED ☐

Sheriff/Chief Deputy

RECOMMEND FOR ☐ SEE ATTACHED ☐

A letter detailing your qualifications and stating your reason for requesting transfer shall accompany this request. Requests for transfer shall not be submitted or recommended for consideration when there are no vacancies.

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Colonel K. Pearson

THRU: Major B. Steube
Major C. Shingledecker
Captain C. Hagaman
Captain L. Murphy
Lieutenant D. Brown
Lieutenant C. Kenney
Sergeant M. Stanley
Sergeant P. Rampone

FROM: Deputy April Dugan

Date: May 24, 2001

Subject: C.I.D.

I would like to express my interest in the posted C.I.D. position. I was hired as a patrol deputy with this office on May 5th, 1997. I worked as a patrol deputy for three years. I then went to the field training rotation where I trained recruit deputies. I am currently assigned to a temporary position in the Selective Enforcement Unit where I have been exposed to a higher level of investigative tools.

To enhance my investigative skills I have completed the following schools: Interviews and Interrogations and Narcotics Identification and Investigation.

I would appreciate your consideration for a position in C.I.D.



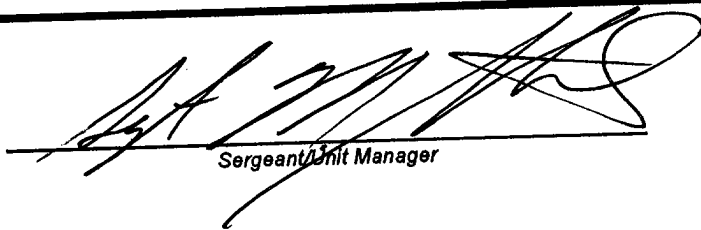
MANATEE COUNTY SHERIFF'S OFFICE TRANSFER REQUEST



NAME APRIL DUGAN DATE 5-24-01
PRESENT POSITION COPS/SEU
HOW LONG IN PRESENT POSITION TEMP POSITION THREE MONTHS RANK DEPUTY
BUREAU ENFORCEMENT DIVISION PATROL SECTION/UNIT PAT/SEU
POSITION REQUESTED DETECTIVE PROPERTY SECTION
BUREAU ADMINISTRATIVE DIVISION INVESTIGATIVE SECTION/UNIT CID/PROPERTY

RECEIVED
MAY 31 2001
PERSONNEL SECTION

APPROVAL PROCESS


Sergeant/Unit Manager

RECOMMEND FOR ☒ SEE ATTACHED ☐

Copy Faxed to Personnel Section

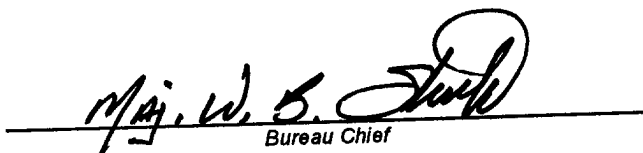
☒ DATE & TIME 5-25-01 1330


Lieutenant/Section Director

RECOMMEND FOR ☒ SEE ATTACHED ☐


Capt. on vacation copy sent
Captain/Division Commander

RECOMMEND FOR ☒ SEE ATTACHED ☐


Bureau Chief

RECOMMEND FOR ☒ SEE ATTACHED ☐

 5/29
Sheriff/Chief Deputy

RECOMMEND FOR ☒ SEE ATTACHED ☐

A letter detailing your qualifications and stating your reason for requesting transfer shall accompany this request. Requests for transfer shall not be submitted or recommended for consideration when there are no vacancies.

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Colonel K. Pearson

THRU: Major B. Steube
Major C. Shingledecker
Captain C. Hagaman
Captain L. Murphy
Lieutenant D. Brown
Lieutenant C. Kenney
Sergeant M. Stanley
Sergeant P. Rampone

FROM: Deputy April Dugan

Date: May 24, 2001

Subject: C.I.D.

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To enhance my investigative skills I have completed the following schools: Interviews and Interrogations and Narcotics Identification and Investigation.

I would appreciate your consideration for a position in C.I.D.



MANATEE COUNTY SHERIFF'S OFFICE
SPECIAL TEAMS APPLICATION FORM



NAME (Last, First, Middle Initial) Dugan, April M. ID NUMBER 10000486/D86

PRESENT POSITION Detective

HOW LONG IN PRESENT POSITION I was transferred from patrol to C.I.D. 10-2-01.

RANK Detective DIVISION Criminal Investigative Division BUREAU Administrative

SPECIAL TEAM APPLYING FOR Law Enforcement Negotiator

LIST OTHER SPECIAL TEAM THAT YOU ARE ON _____

RECEIVED
JUN 25 2002

PERSONNEL SECTION

Approval

[Signature]
Sergeant/Unit Manager

Recommend for Consideration ☒
Disapproved ☐

On leave
Lieutenant/Section Director/Managing Director

Recommend for Consideration ☐
Disapproved ☐

Capt. [Signature]
Captain/Division Commander

Recommend for Consideration ☒
Disapproved ☐

[Signature] 6/20/02
Major/Bureau Chief

Recommend for Consideration ☒
Disapproved ☐

Col. [Signature] 6/22
Chief Deputy

Recommend for Consideration ☒
Disapproved ☐

Sheriff

Recommend for Consideration ☐
Disapproved ☐

REMARKS - A letter detailing your qualification shall accompany this request.

Please see attached letter as requested above.

Manatee County Sheriff's Office

To: Personnel Section

Thru: Major C. Shingledecker
Capt. K. Kenney
Lt. R. Couch
Sgt. Thurman

From: Det. April Dugan *AD*

Date: Thursday, June 13, 2002

Re: Law Enforcement Negotiator position

I am requesting your consideration for the posted position of a Law Enforcement Negotiator. I was hired by the Manatee County Sheriff's Office as a certified law enforcement officer on May 5th, 1997. I have developed good verbal skills and problem solving abilities through my experiences as a patrol deputy, in the Selective Enforcement Unit and as a detective.

I have read and understand general order 4003 pertaining to Emergency Services. I believe I am qualified for this position and I would like to thank you in advance for your consideration.

MANATEE COUNTY SHERIFF'S OFFICE
SPECIAL TEAMS APPLICATION FORMNAME (Last, First, Middle Initial) Dugan, April M. DATE 1/15/04PRESENT POSITION CAC DetectiveHOW LONG IN PRESENT POSITION since 4/23/02RANK Detective DIVISION CPID BUREAU InvestigativeSPECIAL TEAM APPLYING FOR Mounted Patrol

LIST OTHER SPECIAL TEAM THAT YOU ARE ON _____

Approved: 1/16/04Recommend for Consideration ☒Disapproved ☐Sergeant/Unit ManagerCopy faxed to Personnel Section ☒Date and Time 1/16/04 1025Recommend for Consideration ☐Disapproved ☐Lieutenant/Section Director/Managing DirectorRecommend for Consideration ☐Disapproved ☐Captain/Division CommanderRecommend for Consideration ☐Disapproved ☐Major/Bureau ChiefRecommend for Consideration ☐Disapproved ☐Chief DeputyRecommend for Consideration ☐Disapproved ☐Sheriff

REMARKS - A letter detailing your qualification shall accompany this request.

See attached letter.

MANATEE COUNTY SHERIFF'S OFFICE**Memorandum**

To: Sheriff C. Wells

Thru: Col. K. Pearson
Maj. C. Shingledecker
Capt. K. Ministrall
Lt. D. Dummer
Sgt. E. Norris

From: Det. A. Dugan

Date: January 16, 2004

Subject: Application for Mounted Patrol

I am requesting your consideration for appointment on the Mounted Patrol. I have reviewed the posting for this position and General Order 4008. I am confident that I meet all the criteria necessary to perform the duties required for this special team.

I was hired to be a patrol deputy by this office on May 5th, 1997. I worked in the Patrol Division until October 23rd, 2001. During my time in the Patrol Division I served as a Field Training Officer and was an Associate Advisor for our explorer post. I served in Selective Enforcement on the Burglary Task Force and I [REDACTED] in several undercover operations.

On October 23rd, 2001 I transferred to C.I.D. to investigate property crimes.

On April 23rd, 2002 I transferred to C.P.I.D. to investigate crimes against children. This is my current duty assignment.

In May of 2002 I purchased an eight-year-old mare in hopes of one day riding for our Mounted Patrol. I have been practicing diligently to become proficient in horsemanship. I believe at this time my horse and I would be an asset to the Mounted Patrol.

Thank you for your consideration.



MANATEE COUNTY SHERIFF'S OFFICE
SPECIAL TEAMS APPLICATION FORM



NAME (Last, First, Middle Initial) Dugan, April M. DATE 1/15/04
PRESENT POSITION CAC Detective
HOW LONG IN PRESENT POSITION since 4/23/02
RANK Detective DIVISION CPID BUREAU Investigative **RECEIVED**
SPECIAL TEAM APPLYING FOR Mounted Patrol **JAN 30 2004**
LIST OTHER SPECIAL TEAM THAT YOU ARE ON _____
PERSONNEL SECTION

Approval

Recommend for Consideration ☒
Disapproved ☐

[Signature]
Sergeant/Unit Manager

Copy faxed to Personnel Section ☒

Date and Time 1/16/04 1025

Recommend for Consideration ☒
Disapproved ☐

[Signature]
Lieutenant/Section Director/Managing Director

Recommend for Consideration ☒
Disapproved ☐

[Signature]
Captain/Division Commander

Recommend for Consideration ☒
Disapproved ☐

[Signature]
Major/Bureau Chief

Recommend for Consideration ☒
Disapproved ☐

Col Pearson 1/29
Chief Deputy

Recommend for Consideration ☐
Disapproved ☐

Sheriff


REMARKS - A letter detailing your qualification shall accompany this request.


See attached letter.

MANATEE COUNTY SHERIFF'S OFFICE

Memorandum

To: Sheriff C. Wells

Thru: Col. K. Pearson
Maj. C. Shingledecker
Capt. K. Ministrall
Lt. D. Dummer 
Sgt. E. Norris

From: Det. A. Dugan 

Date: January 16, 2004

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On October 23rd, 2001 I transferred to C.I.D. to investigate property crimes.

On April 23rd, 2002 I transferred to C.P.I.D. to investigate crimes against children. This is my current duty assignment.

In May of 2002 I purchased an eight-year-old mare in hopes of one day riding for our Mounted Patrol. I have been practicing diligently to become proficient in horsemanship. I believe at this time my horse and I would be an asset to the Mounted Patrol.

Thank you for your consideration.



MANATEE COUNTY SHERIFF'S OFFICE
SPECIAL TEAMS APPLICATION FORM



RECEIVED

JAN 25 2005

PERSONNEL

NAME (Last, First, Middle Initial) Dugan, April M.

DATE 1/20/05

PRESENT POSITION Detective

HOW LONG IN PRESENT POSITION 3 years

RANK 2nd class Deputy DIVISION CID

BUREAU Investigative

SPECIAL TEAM APPLYING FOR TACT/CERT

LIST OTHER SPECIAL TEAM THAT YOU ARE ON _____

Approval

Recommend for Consideration ☒

Disapproved ☐

Sgt Kent B. Huff
Sergeant/Unit Manager

Copy faxed to Personnel Section ☒

Date and Time 1/20/05 @ 5:18 pm

Recommend for Consideration ☒

Disapproved ☐

H. Wm. A. Vito
Lieutenant/Section Director/Managing Director

Recommend for Consideration ☒

Disapproved ☐

Capt. Kautman
Captain/Division Commander

Recommend for Consideration ☒

Disapproved ☐

Mr. C. D. [Signature]
Major/Bureau Chief

Recommend for Consideration ☒

Disapproved ☐

Col. W. B. Stump
Chief Deputy

Recommend for Consideration ☒

Disapproved ☐

Charles B. White
Sheriff

REMARKS - A letter detailing your qualification shall accompany this request.

MEMORANDUM

To: Sheriff Charles Wells
Thru: Maj. C. Shingledecker
Capt. D. Kaufman
Lt. W. Vitaioli
Sgt. K. Huff

From: Det. A. Dugan

Subject: TACT/CERT team applicant

I am requesting your consideration to be a TACT/CERT team member. I have been working for the Sheriff's Office as a Law Enforcement deputy since May 5Th, 1997. I am proficient with the firearms qualification and am on the list to attend the next CMS firearms instructor course offered. I possess a valid Florida driver's license. I am certified in the use of OC spray. I am available for call outs. I am willing to put forth every effort on the agility exercises and I am a team player.

I appreciate your consideration and thank you in advance.



MANATEE COUNTY SHERIFF'S OFFICE
TRANSFER REQUEST



NAME April Dugan DATE 10/3/07
PRESENT POSITION PATROL DEPUTY
HOW LONG IN PRESENT POSITION _____ RANK Deputy Sheriff
BUREAU Enforcement DIVISION PATROL SECTION/UNIT S1E
POSITION REQUESTED CPID Detective
BUREAU Investigative DIVISION CPID SECTION/UNIT CAC

APPROVAL PROCESS

[Signature]
Sergeant/Unit Manager

RECOMMEND FOR ☒ SEE ATTACHED ☐

COPY FAXED TO PERSONNEL SECTION ☒

DATE & TIME 10/9/07 240pm

[Signature]
Lieutenant/Section Director

RECOMMEND FOR ☒ SEE ATTACHED ☐

[Signature]
Captain/Division Commander

RECOMMEND FOR ☒ SEE ATTACHED ☐

[Signature]
Bureau Chief

RECOMMEND FOR ☒ SEE ATTACHED ☐

[Signature]
Sheriff/Chief Deputy

RECOMMEND FOR ☒ SEE ATTACHED ☐

I have read the job description and meet the qualifications required for this position.

RECEIVED

If applicable, please check below:

☐ Supporting documents are currently in my personnel file.

☐ I have provided the supporting documents with this request.

OCT 11 2007

PERSONNEL

I further understand that if I don't meet the minimum requirements, I will be removed from the eligibility list and not allowed to continue in the process.

[Signature]
Signature of employee

10/3/07
Date

Dale C Hayes DCH
Personnel Specialist-Print name & initial


☒ Meets qualifications
☐ Doesn't meet qualifications

A letter detailing your qualifications and stating your reason for requesting transfer shall accompany this request. Requests for transfer shall not be submitted or recommended for consideration when there are no vacancies.

MANATEE COUNTY SHERIFF'S OFFICE

Memorandum

To: Sheriff Brad Steube

Thru: Col. Hagaman
Maj. Dummer 
Capt. Couch
Lt. Schaeffer
Sgt. Turner

From: Dep. A. Dugan

Date: October 3, 2007

Subject: Transfer request

I am requesting your consideration for transfer to CPID as a detective. I have been successful in this position in the past and am confident that I meet all the criteria necessary to perform the duties required for this special position again.

I was hired to be a patrol deputy by this office on May 5th, 1997. I worked in the Patrol Division until October 23rd, 2001. During my time in the Patrol Division I served as a Field Training Officer and was an Associate Advisor for our explorer post. I served in Selective Enforcement on the Burglary Task Force and I assisted SID in several undercover operations.

On October 23rd, 2001 I transferred to C.I.D. to investigate property crimes.

On April 23rd, 2002 I transferred to C.P.I.D. to investigate Crimes Against Children. I then transferred back to property crimes to resolve some personal issues. In 2005 I was transferred to patrol and am currently assigned to the patrol division.

I feel that CAC detectives perform the most important jobs of all. I wish to come back to this position and retire as a CAC detective. Furthermore I recently gave birth to my first child and I believe the position would be much more suited to the needs of my family over the patrol deputy position.

Thank you for your consideration.



MANATEE COUNTY SHERIFF'S OFFICE
TRANSFER REQUEST



NAME April Dugan DATE 10/31/07
PRESENT POSITION Patrol Deputy
HOW LONG IN PRESENT POSITION 2yrs RANK Deputy
BUREAU Enforcement DIVISION Patrol SECTION/UNIT D3
POSITION REQUESTED Civil Process U/E Deputy
BUREAU Enforcement DIVISION Patrol SECTION/UNIT D3

APPROVAL PROCESS

[Signature]
Sergeant/Unit Manager

COPY FAXED TO PERSONNEL SECTION ☒

[Signature]
Lieutenant/Section Director

[Signature]
Captain/Division Commander

[Signature]
Bureau Chief

[Signature]
Sheriff/Chief Deputy

RECOMMEND FOR ☒ SEE ATTACHED ☐

DATE & TIME 10/31/07

RECOMMEND FOR ☒ SEE ATTACHED ☐

RECOMMEND FOR ☒ SEE ATTACHED ☐

RECOMMEND FOR ☒ SEE ATTACHED ☐

RECOMMEND FOR ☒ SEE ATTACHED ☐

I have read the job description and meet the qualifications required for this position.

If applicable, please check below:

☒ Supporting documents are currently in my personnel file.

☐ I have provided the supporting documents with this request.

I further understand that if I don't meet the minimum requirements, I will be removed from the eligibility list and not allowed to continue in the process.

[Signature]
Signature of employee

10/31/07
Date

Dale C Hayes
Personnel Specialist-Print name & initial

☒ Meets qualifications



☐ Doesn't meet qualifications

A letter detailing your qualifications and stating your reason for requesting transfer shall accompany this request. Requests for transfer shall not be submitted or recommended for consideration when there are no vacancies.

MANATEE COUNTY SHERIFF'S OFFICE

Memorandum

To: Sheriff Brad Steube


Thru: Col. Hagaman 
Maj. Dummer
Capt. Couch 
Lt. Schaeffer
Sgt. Turner

From: Dep. A. Dugan

Date: October 31, 2007

Subject: Transfer request

I am requesting your consideration for transfer to Civil Process Deputy. I am confident that I meet all the criteria necessary to perform the duties required for this position.

I was hired to be a patrol deputy by this office on May 5th, 1997. I worked in the Patrol Division until October 23rd, 2001. During my time in the Patrol Division I served as a Field Training Officer and was an Associate Advisor for our explorer post. I served in the Selective Enforcement Unit on the Burglary Task Force and  in several undercover operations.

On October 23rd, 2001 I transferred to C.I.D. to investigate property crimes.

On April 23rd, 2002 I transferred to C.P.I.D. to investigate Crimes Against Children. In 2005 I transferred to patrol and am currently assigned to the patrol division.

Given my investigative background and drive I feel I'd be an great asset to the Civil Unit.

On a more personal note; seven weeks ago I gave birth to my first child and I believe this position/schedule would be much more suited to the needs of my family.

I thank you in advance for your consideration.

IN-HOUSE POSITION ADVERTISEMENT

ADMINISTRATIVE BUREAU

POSITION: CIVIL PROCESS L/E DEPUTY
COURT PROCESS SECTION
LEGAL AFFAIRS/SUPPORT DIVISION

OPENING DATE: OCTOBER 23, 2007

CLOSING DATE: NOVEMBER 2, 2007

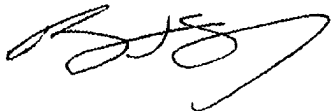
In-house transfer requests are now being accepted for the position of CIVIL PROCESS L/E DEPUTY. Candidate must be clear of probationary status to qualify. Successfully completed the Field Training and Evaluation Program (FTEP) preferred.

NOTE: All in-house transfer requests will be governed by, and in compliance with, General Order 3015 (Promotions and Transfers).

The above vacancy will be filled in accordance with the Sheriff's policy for filling open positions within the Manatee County Sheriff's Office.

Any person presently employed by the Manatee County Sheriff's Office and working in a certified Law Enforcement position that desires to be considered for transfer to the position of CIVIL PROCESS L/E DEPUTY, must meet certain minimum qualifications, as outlined in the attached job description.

Transfer request MCSO FM 87-029 <revised 9/91> must be submitted through your Chain of Command during the above listed time period. All completed transfer requests must arrive in the Personnel Section within three (3) days following the announced closing date.



DIR. BRIAN SCHNERING
Personnel Section

BAS/sae

EOE – ADA

**MANATEE COUNTY SHERIFF'S OFFICE
MEMORANDAN**

TO: Major Shingledecker
Investigative Bureau

FROM: Brian A Schnering
Human Resources Director

DATE: August 17, 2010

SUBJECT: Transfer Request for April Dugan Transportation Deputy

The Human Resource Section has received this transfer request for the above listed employee/position. However, the request is denied and returned for the following reason(s):

- ☐ The employee is currently on probation and ineligible to request a transfer at this time.
- ☐ The employee's personnel file does not reflect that they meet the minimum educational requirement for this position.
- ☐ The employee's personnel file does not reflect that they meet the minimum experience/qualification for this position.
- ☐ The employee does not meet the typing requirements for this position.
- ☐ Disciplinary Action as outlined in General Order 3015 2.1.4.1.4
- ☐ The employee does not meet the Law Enforcement certification requirement.
- ☒ The employee's transfer request has been denied thru their chain of command.
- ☐ The employee failed the Employment Eligibility Board.
- ☐ Other

IF THE EMPLOYEE CAN PROVIDE THE NECESSARY DOCUMENTATION TO SUPPORT THIS TRANSFER REQUEST, PLEASE FAX IT IMMEDIATELY ALONG WITH YOUR TRANSFER REQUEST FOR FUTHER REVIEW.

/dh

cc: April Dugan
Personnel file



MANATEE COUNTY SHERIFF'S OFFICE - PROMOTION APPLICATION

DEPUTY FIRST CLASS ☐DEPUTY SECOND CLASS ☒**THIS FORM MUST BE SUBMITTED 45 DAYS PRIOR TO REVIEW DATE.**

NAME April M. Dugan DATE 10/6/03
PRESENT RANK Detective PERMANENT ID # D86 SOCIAL SECURITY NUMBER
BUREAU Investigative DIVISION CPID SECTION CAC UNIT
RANK APPLYING FOR Deputy Second Class CURRENT REVIEW DATE 5-597

List classes/assignments you feel meet the qualifications for the position applied for, attaching certificates/diplomas where applicable. Certificates/diplomas are required in order to obtain credit.

CLASS OF INSTRUCTION OR SPECIAL TEAM MEMBER	HOURS OF CLASS OR YEARS OF MEMBERSHIP	CERTIFICATE OR DIPLOMA ATTACHED			
Cadet/Explorer Advisor	1	1 year	YES	NO	<input checked="" type="checkbox"/>
Interview & Interrogation	1~ 40	80 hours	YES	NO	<input checked="" type="checkbox"/>
Intoxilyzer Operator	1~ 40	80 hours	YES	NO	<input checked="" type="checkbox"/>
Radar Operator	1~	40 hours	YES	NO	<input checked="" type="checkbox"/>
F.T.O.	1~	40 hours	YES	NO	<input checked="" type="checkbox"/>
Injury And Death Investigation	1~	40 hours	YES	NO	<input checked="" type="checkbox"/>
	(3 1/2)		YES	NO	<input checked="" type="checkbox"/>
			YES	NO	<input checked="" type="checkbox"/>
			YES	NO	<input checked="" type="checkbox"/>
			YES	NO	<input checked="" type="checkbox"/>

SERGEANT / UNIT MANAGER [Signature] DATE 10/6/03
LIEUTENANT / SECTION DIRECTOR [Signature] DATE 10/6/03
CAPTAIN / DIVISION COMMANDER [Signature] DATE 10-6-03
BUREAU CHIEF [Signature] DATE 10/8/03

***** OFFICE USE ONLY *****

DOES THIS APPLICANT MEET ALL QUALIFICATIONS FOR THE POSITION APPLIED FOR?

TRAINING DIRECTOR (Attach Training Screen and Proof Of Fitness Evaluation) 10/6/03 [Signature] DATE RECEIVED 10-9-03
INITIALS, ADMINISTRATIVE BUREAU CHIEF ck YES ☒ NO ☐ DATE 10-7-03

Column A - Special Teams Membership

Blue Lightening (Minimum 2 years experience)
 Cadet Advisor
 Canine Handler
 Cannabis Eradication
 CERT
 Dive
 Emergency Services
 HAZMAT Bomb
 Honor Guard
 Mounted Patrol
 Pilot
 Polygraph Operator
 Reserve Advisor/Liaison
 SWAT
 TACT

Column B - 80 Hours or longer

AA/AS Degree (1 Qualifier - Copy of degree and transcript must be attached to obtain credit.)
 Advanced Traffic Accident Investigation
 At Scene Traffic Accident
 BA/BS Degree or Higher (2 Qualifiers - Copy of degree and transcript must be attached to obtain credit.)
 CPP (Crime Prevention)
 DARE (SRO)
 Defensive Tactics Instructor
 First Responder/CPR Instructor
 GREAT (SRO)
 Instructor Techniques
 Line Supervision
 Mid-Management
 SRP (SRO)
 Traffic Homicide Investigation

Column C - Under 80 hours

Applicant Background Investigation
 Basic and Advanced (Both) Enforceable Civil Process
 Basic and Advanced (Both) Non-Enforceable Civil Process
 Cell Extraction
 Court Security Seminar
 CPTED (Crime Prevention, Street Gangs
 ID & Investigation
 Crime Scene Photography
 Crime Scene Technicians
 Criminal Investigation Techniques
 Criminal Patrol Drug Enforcement
 Crisis Intervention
 Discipline And Special Confinement
 Driving Instructor
 DUI Standardized Field Sobriety Testing
 DWI Instructor
 Fire fighting for Corrections
 Firearms Instructor
 Homicide Investigation
 Hostage Negotiations
 Human Diversity Instructor
 Internal Affairs
 Interview and Interrogation
 Intoxilyzer Maintenance
 Intoxilyzer Operator
 K9 Team Instructor
 Model For Management
 Narcotic Identification and Investigation
 Radar Instructor
 Radar Operator
 School Resource Officer (SRO)
 Seminar for the Field Training Officer (FTO)
 Sex Crime Investigation
 Staff Inspections
 Stress Awareness for Corrections
 Supervisory Techniques For Corrections
 Survival Spanish for Criminal Justice
 Unresolved Death Investigation
 Verbal Judo

All courses/seminars will be evaluated on a case-by-case basis for credit. These lists are examples only and are not all inclusive.

No more than two from Column A may be applied. Each counts as 1 Qualifier. Any item in Column B counts as 1 Qualifier. Items in Column C require two to count as 1 Qualifier if at least 40 hours. (Each 8 hours = 1/10)

Deputy 2nd Class requires an two Qualifiers, proof of fitness evaluation, plus the performance evaluation requirements.

Deputy 1st Class requires 2nd Class rating, 4 additional Qualifiers, proof of fitness evaluation, plus the performance evaluation requirements.

MANATEE COUNTY SHERIFF'S OFFICE
M E M O R A N D A

TO: Deputy April Culbreath

THRU: Captain P. Bartholomew
Lieutenant J. Perez

FROM: Major Dennis P. Dummer *DED*

DATE: September 29, 2015

SUBJECT: Appreciation

We received an e-mail Jim Twiggs who wished to express his appreciation for your highly professional and thorough handling of an incident. He also stated your efforts prevented a significant property loss. Great job!!

Please accept my sincere appreciation for your dedication to duty and commitment to our community. You not only reflect a positive image upon yourself but our agency.

DPD/yfg

cc: Personnel

RECEIVED

SEP 30 2015

MCSO Human Resources

Gard, Yvonne

From: NoReply@ManateeSheriff.org
Sent: Tuesday, September 29, 2015 12:27 PM
To: Gard, Yvonne
Subject: Compliment Form

Name: [REDACTED]

Address: [REDACTED]

Email: [REDACTED]

Phone: [REDACTED]

Alt Phone: [REDACTED]

Would like to be contacted? No

Deputy: Det. April Culbreath

Compliment: My family and I want to express our heartfelt thanks and appreciation for Det. Culbreath's highly professional and thorough handling of what likely would have been a significant property loss without her thorough efforts and the incredible honesty and integrity of one of our citizens.

Thank You So Much, April!!

MANATEE COUNTY SHERIFF'S OFFICE
M E M O R A N D A

TO: Deputy April Culbreath

THRU: Captain L. Waiters
Lieutenant J. Perez

FROM: Major Dennis P. Dummer ^{DED}

DATE: July 30, 2014

SUBJECT: Appreciation

RECEIVED

AUG 01 2014

HUMAN RESOURCES

We received a letter from [REDACTED] who wished to express her appreciation for your assistance when her husband left their residence to take his life. She stated you responded to take all the necessary information and relayed it to other deputies, staying with her. Even though her husband was found too late, she stated that you were compassionate, professional and touched her life on a terrible day.

Please accept my sincere appreciation for your dedication to duty and commitment to our community. You not only reflect a positive image upon yourself but our agency.

DPD/yfg

cc: Personnel

July 27, 2014

7/31/14 -
My in Shingledecker
My in Dunner
Sheriff Brad Steube

Manatee County Sheriff's Office

600 301 Blvd W, Suite 202

Bradenton, FL 34205-7953

MSO # [REDACTED]

RE: Deputy Culbreath, Detective Kenney and Advocate Cavazos

Dear Sheriff Steube:

Almost 6 months ago, on February 8th, that morning my husband got up, got into our truck, drove off and took his life. When I realized he was gone, I knew immediately what he was going to do and I called 911.

Quickly, Deputy April Culbreath came to my home took all information, stayed with me and my sister and was in contact with other deputies while they searched for my husband. During this time, my brother-in-law also searched for him. About 2:00 PM that day, my brother-in-law did find him, unfortunately too late as my husband was already dead.

He called 911 and your officers came to the location where my husband was found. Eventually, my brother-in-law, Detective John Kenney and Victim Advocate Maria Cavazos came to my home to inform me that they did find my husband.

I was so impressed with the professionalism of your people. They were not only professional but compassionate as well. My situation that day was one of the most horrible that anyone could have to go through. But your people – all that I met, treated me with respect and dignity.

All too often, you hear only negative things about our law enforcement personnel and never the good they do. I would like to express my appreciation and thank all those that touched our lives that terrible day for their compassion and professionalism.

Sincerely,

[REDACTED]

**MANATEE COUNTY SHERIFF'S OFFICE
M E M O R A N D A**

TO: Deputy April Culbreath

THRU: Captain L. Waiters
Lieutenant J. Perez

FROM: Major Dennis P. Dummer ^{DED}

DATE: July 30, 2014

SUBJECT: Appreciation

RECEIVED

AUG 01 2014

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Please accept my sincere appreciation for your dedication to duty and commitment to our community. You not only reflect a positive image upon yourself but our agency.

DPD/yfg

cc: Personnel

July 27, 2014

7/31/14 -
My in Shingledecker
Mr. Dunner

Sheriff Brad Steube

Manatee County Sheriff's Office

600 301 Blvd W, Suite 202

Bradenton, FL 34205-7953

MSO # [REDACTED]

RE: Deputy Culbreath, Detective Kenney and Advocate Cavazos

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I was so impressed with the professionalism of your people. They were not only professional but compassionate as well. My situation that day was one of the most horrible that anyone could have to go through. But your people – all that I met, treated me with respect and dignity.

All too often, you hear only negative things about our law enforcement personnel and never the good they do. I would like to express my appreciation and thank all those that touched our lives that terrible day for their compassion and professionalism.


Sincerely,

[REDACTED]

MANATEE COUNTY SHERIFF'S OFFICE
MEMORANDUM

TO: April Culbreath

THRU: Sergeant Karen Devries
Lieutenant [REDACTED]

FROM: Captain William Jordan 

DATE: September 11, 2015

SUBJECT: Letter of Appreciation

Detective Culbreath,

[REDACTED] I would like to acknowledge the excellent job you did on a case assigned to you, [REDACTED] I personally contacted you in reference to a burglary that occurred in the Mill Creek sub-division. The victim was a teacher at Gullett Elementary School and works with my wife. I asked you call her back again just to see if there was any additional information that the volunteer callback person did not get. You not only gathered possible information on a suspect but you were able to recover all of the items that were stolen and even some items the victim did not know were taken. You secured an arrest warrant for the suspect [REDACTED] for an Occupied Burglary. You were well organized and prepared during the entire investigation, this is commendable.

Please accept my sincere appreciation for your dedication to duty, and your professional work ethic. Your actions are not only a positive reflection upon yourself, but the agency.

Cc:
Human Resources
File

MANATEE COUNTY SHERIFF'S OFFICE
MEMORANDA

To: Det. April Culbreath

From: Lt. Aaron Bowen 

Date: 7-26-2023

Subject: Appreciation – Vape Shop Trend Operation

On 7-23-2023, you were a part of a team which conducted proactive surveillance due to a vape shop burglary trend that was about to get out of hand. The team was successful on the very first night, which is a rarity.

The team arrested all three subjects and recovered of thousands of dollars in stolen goods, as well as the stolen vehicle they were utilizing. The subsequent investigation led to the closure of the recent vape shop burglary cases we had and is soon to lead us to additional suspects from those cases.

I appreciate your dedication and schedule adjustment needed to make this happen on such short notice. Thank you.!

ARB

cc: Personnel

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDA

TO: Detective April Culbreath
10000486
THRU: Captain Anthony Williams
Lieutenant Aaron Bowen
Sergeant Jason Farrier
FROM: Major Todd M. Shear
Chief, Investigative Bureau
DATE: March 27, 2023
SUBJECT: Appreciation - Operation Nighthawk

In early of 2023, the county began to see a significant increase in vehicle burglaries. To combat this trend, Operation Nighthawk was created to apprehend burglars, suppress future crimes, and provide a heavy night presence at the most vulnerable times and days as identified by the Crime Analysis unit. Personnel from both Investigative and Enforcement components worked together for over a 2-month time span starting on January 17th. As a result of this Operation, several arrests were made, firearms were seized, and burglaries were prevented.

The success of this operation would not have been possible without your investigative efforts and participation. Please accept my sincere gratitude for your dedication to duty, and your continuous commitment to the protection of property in our community. Your actions are not only a positive reflection upon yourself, but the agency.

Thank you for a job well done!

TMS/tpp

cc: Personnel



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

TO: Deputy A. Watson-Dugan

THRU: Sgt. D. Kaufman
Lt. J. Baroncelli
Captain L. Murphy

FROM: Captain Connie Shingledecker *CS*

DATE: December 17, 1997

SUBJECT: Letter of Appreciation

On October 25, 1997, you conducted an on-scene investigation of grand theft at [REDACTED]. As part of your investigation, you identified and lifted latent prints from the crime scene.

Because of your determination and extra effort, a suspect has been developed in this case and will almost certainly be arrested and convicted for this offense. For this, you have the gratitude of the entire Criminal Investigation Division.

Please accept my personal thanks for a job well done.

CS/nmv

cc: Personnel

RECEIVED
DEC 17 1997
PERSONNEL SECTION



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

TO: Dep. April Watson
THRU: Sgt. L. Andress
Lt. R. Walker
Capt. L. Murphy
FROM: Captain Connie Shingledecker *CS*
DATE: November 10, 1998
SUBJECT: Letter of Appreciation

On October 10, 1998, you conducted an on-scene investigation of a burglary to a residence at [REDACTED] As part of your investigation, you identified and lifted latent prints from the crime scene.

Because of your determination and extra effort, a suspect has been developed in this case and will almost certainly be arrested and convicted for this offense. For this, you have the gratitude of the entire Criminal Investigation Division.

Please accept my personal thanks for a job well done.

CS/nmv

cc: Personnel



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

TO: Deputy April Watson

THRU: Sgt. L. Andress
Lt. R. Walker
Captain C. Hagaman

FROM: Captain Larry Murphy *LM*

DATE: February 1, 1999

SUBJECT: Letter of Appreciation

On January 11, 1999, you conducted an on-scene investigation of burglary to a residence at [REDACTED] As part of your investigations, you identified and lifted latent prints from the crime scene.

Because of your determination and extra effort, a suspect has been developed in this case and will almost certainly be arrested and convicted for this offense. For this, you have the gratitude of the entire Criminal Investigation Division.

Please accept my personal thanks for a job well done.

LM/sd

cc: Personnel



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

TO: Deputy April Watson

THRU: Sgt. Gibson
Lt. Walker
Captain Hagaman

FROM: Captain Larry Murphy *LM*

DATE: July 29, 1999

SUBJECT: Letter of Appreciation

RECEIVED
JUL 29 1999
PERSONNEL SECTION

On 6/5/99, you conducted an on-scene investigation of a burglary at [REDACTED]
[REDACTED] As part of your investigation, you identified and lifted latent prints from the crime scene.

Because of your determination and extra effort, a suspect has been developed in this case and will almost certainly be arrested and convicted for this offense. For this, you have the gratitude of the entire Criminal Investigation Division.

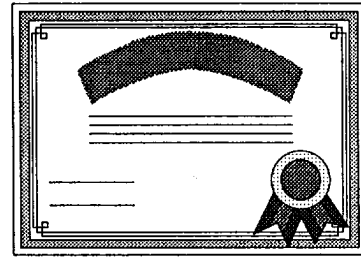
Please accept my personal thanks for a job well done.

LM/scd

cc: Personnel

MANATEE COUNTY SHERIFF'S OFFICE
OFFICER IMPROVEMENT COMMITTEE

M E M O R A N D U M



TO: Dep. April Watson-Dugan

FROM: Sally Stewart, Chairperson *W*
Officer Improvement Committee

DATE: August 19, 1998

SUBJECT: Deputy of the Month Nomination

Please find attached a letter nominating you for "Deputy of the Month". This letter was received and presented to the Officer Improvement Committee August 20, 1997. It has been kept in an open file to be considered each month for a 12 month period. While you were not presented with the "Deputy of the Month" award, you were certainly worthy of this award. Obviously, there are others within the agency that also feel this way. I am forwarding you this letter so that you know that you are appreciated. On behalf of the Officer Improvement Committee, thank you for all that you have done to make life in our profession and in the community a safer place.

I have taken the liberty to forward a copy of the letter of nomination to personnel to be placed in your file.

/sas

cc: Personnel File

RECEIVED JUL 16 1997

RICHARD LEE BUCKLE, P.A.
ATTORNEY AND CHRISTIAN COUNSELOR AT LAW
442 OLD MAIN STREET
BRADENTON, FLORIDA 34205
PHONE: (941) 748-2424
FAX: (941) 748-2444
TOLL FREE: 1-800-299-5680

CRIMINAL LAW
MARITAL & FAMILY LAW

GENERAL TRIAL PRACTICE
PERSONAL INJURY & WRONGFUL DEATH

July 15, 1997

HAND DELIVERY

Major Kenneth Pearson
MANATEE COUNTY SHERIFF'S DEPARTMENT
Bradenton, Florida

RE: [REDACTED] vs. [REDACTED] Registration of Out of State Custody Decree and Domestication of Foreign
Judgment; Case No. [REDACTED] Manatee County Circuit Court
RLB, P.A., File No. [REDACTED]

Dear Major Pearson:

Please be advised that this letter confirms our most recent telephone conversation of Saturday afternoon, July 12, 1997, regarding the cause captioned above. I had called you Saturday morning because I was unable to get a hold of Sergeant David Turner. Subsequent thereto I did contact Sergeant David Turner. He was extremely helpful in the matter captioned above which involved a mother who would not turn over custody of her children to their natural father pursuant to a lawful court order from the State of Massachusetts. When you called I had already accomplished everything that was able to be completed, but did express to you my sincere appreciation for the outstanding work of Sergeant David Turner and especially that of Deputy April Dugan.

Deputy April Dugan was at the front desk and in my opinion went above and beyond the call of duty. She acted in the capacity of a caring and concerned law enforcement officer. Because of her heroic efforts and commitment to doing the right thing for two minor children, my client [REDACTED] was able to at least visit with his children in the lobby of the sheriff's office.

I believe that Deputy April Dugan should be considered for deputy of the month. You said that she was a new employee. I hope and pray that she will have a long and outstanding career in law enforcement because it is her type of commitment to duty and service that blesses the entire community. Deputy Dugan has outstanding characteristics. They include, but not by way of limitation, commitment to duty, service, compassion for children (and lawyers too), and a commitment to excellence. It was a pleasure to meet her and watch her work. I look forward to working with her in the future. If you wish any further details on her fine work in this matter, please feel free to call upon me at any time.

The **LORD** bless you and keep you; the **LORD** make His face shine upon you and be gracious to you; the **LORD** turn His face toward you and give you peace (Numbers 6:24-26).

Most sincerely yours,

RICHARD LEE BUCKLE, P.A.

Richard Lee Buckle
RICHARD LEE BUCKLE, ESQUIRE

RLB/dmh

cc: [REDACTED]

*7/18/97 called and requested
further details to present
to OIC in August*

Enclosures: (1) "The Tribute" (tract)
(2) Richard Lee Buckle's Personal Testimony

"GLORIFYING GOD BY SERVING YOU ACCORDING TO HIS WORD."

MANATEE COUNTY SHERIFF'S OFFICE
MEMO

TO: Deputy Watson

THROUGH: Sgt. Andress

FROM: Sgt. Rampone

DATE: June 16, 1999

SUBJECT: Letter Of Appreciation

RECEIVED

JUN 18 1999

PERSONNEL SECTION

On June 10, 1999 you took a burglary report, [REDACTED] from [REDACTED]
[REDACTED] of [REDACTED]. The report contained excellent detail and
was written with clarity. It reflects the efforts you put into a thorough
investigation. In the past several weeks I have had other detectives come to me,
complimenting your report writing skills.

I hope in the future you consider training recruit deputies or instructing at the
academy. I believe that both you and the Sheriff's Office would benefit. Keep up
the good work.

cc. Capt. Hagaman
personnel

TY SHERIFF'S OFFICE
Florida



RECEIVED JUN 16 1999
JUVENILE ☒ CONFIDENTIAL ☐

Case No. [redacted] Date 6.10.99
Time Disp 1839 SAO Number

1. <u>Burglary</u>	3. INC CODE 22000	4. C Committed A Attempted <u>C</u>	5. CLR 1 No Extradition 2 Arr Prim Only 3 Offender Died	4 Waiver 5 SAO Decline 6 Juv - No Cust
Offense 2	INC CODE	C Committed A Attempted	CLR 1 No Extradition 2 Arr Prim Only 3 Offender Died	4 Waiver 5 SAO Decline 6 Juv - No Cust

6. Date Occurred 06/10/99 thru [] Time Occurred 1330 thru 1810 Day 5 thru []

7. Location of Offense (Street Number, Directions, Street Name, Apartment Number, City, include Business Name)				
8. Div PAT	9. Zone E40	10. Grid 1028	11. Related Incident Number	
12. Location Type	01 Residence/Single 02 Apartment/Condo 03 Residence/Other 04 Hotel/Motel 05 Convenience Store	06 Gas Station 07 Liquor Sales 08 Bar/Night Club 09 Supermarket 10 Department Store	11 Specialty Store 12 Drug Store/Hospital 13 Bank/Financial 14 Commercial/Office 15 Industrial/Mfg	16 Storage 17 Govt/Public Bldg 18 School/University 19 Jail/Prison 20 Religious Bldg
13. Forced Entry	0 n/a 1 yes 2 no	14. Type Weapon	00 n/a 01 Handgun 02 Rifle 03 Shotgun	04 Firearm 05 Knife/Cutting 06 Blunt Object 07 Hands/Fists/Feet
15. Number Of Offenses Committed	UK unk 00 n/a	16. Number Of Offenders	UK unk 00 n/a	17. Number Arrested
01		UK		00
18. Lighting			1 Day	2 Night
0 Unk				1

Pers Type V301C	20. Pers Type C complainant	V victim O other	1 juvenile 2 officer	3 adult 4 business	5 govt 6 church	9 other	21. A adult J juvenile	A
Name (last, first, middle initial)	Race N n/a W white	B black I american indian O oriental	U unk	Sex M male F female	N n/a U unk	Date of Birth		
Age 40	Hgt	Wgt	Hair BLN	Eyes BLU	23. Offense Indicator	1 offense 2 offense	3 both	1
24. Injury Extent 0 none 1 minor 2 serious 3 fatal	0	25. Injury Type	00 n/a 01 shot	02 stab 03 cut	04 unconscious 05 broken bone	06 internal 07 loss of teeth	08 burns 09 bruises	99 other
0								0000
26. Address	City	State	Zip Code	27. Res 0 n/a 1 city 2 county 3 florida	4 out-of-state			2
28. Res Status 0 n/a 1 full year 2 part yr 3 non-res	1	Res Phone	29. Occupation/Employer	Hairdresser / Hide Away Salon				
30. Vic/Offender Relationship	00 n/a 01 unknown 02 stranger 03 spouse	04 ex-spouse 05 co-habitant 06 parent 07 brother/sister	08 child 09 step-parent 10 step child 11 in-law	12 other family 13 student 14 teacher 15 child of boy/girl friend	16 boy/girl friend 17 friend 18 neighbor 19 sitter	20 employee 21 employer 22 landlord/tenant 23 acquaintance	99 other	01

31. Reconstruction - May be continued on reverse

Unknown person(s) entered the victim's home, through the unlocked front door. Once inside the victim's residence unknown person(s) stole the listed property.

attached to letter of appreciation dated 6-16-99

32. Referred To 01 Records
02 property room
04 cid-persons
06 narcotics
09 other

Crime Scene Technician ID #



SUPPLEMENT CONTINUATION - MANATEE COUNTY SHERIFF'S OFFICE

Case No. [REDACTED]

ORIGINAL ☐ SUPPLEMENTAL ☐ CONFIDENTIAL ☐ AFFIDAVIT ☐ CONTINUATION ☒

Date: 6.10.99

CLR Code
0 open 2 except
1 arrest 3 unfoundCLR Type
1 No extradition
2 arrested on primary offense
3 offender died4 waiver
5 sao declines
6 juvenile no custody

INC Code From To

100. Narrative / Supplemental (Crime Scene, Investigation, Interviews - Print Neatly)

Incident / Offense

Burglary

CRIME SCENE *

THE RESIDENCE LOCATED AT [REDACTED]

INVESTIGATION:

N
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I MET WITH THE VICTIM [REDACTED] I LOOKED THROUGH THE VICTIM'S HOUSE, INSIDE AND OUTSIDE. I SPOKE TO THE VICTIM'S TWO DAUGHTERS, [REDACTED] AND [REDACTED] WHOM BOTH LIVE WITH THEIR MOTHER. I STARTED DUSTING FOR FINGER PRINTS AT THE FRONT DOOR WHICH APPEARED TO BE THE ENTRY AND EXIT POINT. I DID NOT FIND ANY PRINTS ON THE FRONT DOOR KNOB, JUST SMUDGE MARKS. I DUSTED THE DOOR KNOB TO THE COMPUTER ROOM AND LIFTED ONE CARD OF PRINTS. I LIFTED ONE CARD OF PRINTS OFF THE PLUG TO THE FAX MACHINE THAT HAD BEEN UNPLUGGED BY THE BURGLAR. I TOOK TWO CARDS OF PRINTS OFF A PLASTIC COMPUTER DISC CASE THAT WAS MOVED OFF THE FAX MACHINE BY THE BURGLAR. IN [REDACTED] BEDROOM I TOOK TWO CARDS OF PRINTS OFF THE OUTSIDE DOOR KNOB AND TWO CARDS OF PRINTS OFF OF THE DRESSER DRAWER KNOBS. IN [REDACTED] BATHROOM I TOOK 8 PRINT CARDS OF PRINTS OFF THE MEDICINE CABINET MIRROR AND SINK AREA. IN [REDACTED] BEDROOM I LIFTED THREE CARDS OFF THE SIDE OF HER TELEVISION, BY WHERE THE FIRST VCR WAS TAKEN FROM AND THREE CARDS OFF HER SATELLITE DISH BOX. I LIFTED TWO CARDS OF PRINTS OFF THE MEDICINE CABINET IN WARD'S BATHROOM. THERE WAS A BLUE GLASS IN THE KITCHEN SINK, WHICH THE COMPLAINANT BELIEVES THE

Sworn to subscribed before me this ____ day of _____, 19____

Notary Public, Deputy Sheriff, State of Florida

Affiant

X

Complainant / Victim (print)

Referred To

☐ 01 records
☐ 02 property room☐ 03 cid - property
☐ 04 cid - persons☐ 05 cid - juv.
☐ 06 narcotics☐ 07 sheriff
☐ 08 sao☐ 09 other

Reporting Deputy (please print)

ID

Date / Time

Editing Supervisor (please print)

ID

SUPPLEMENTAL PROPERTY REPORT - MANATEE COUNTY SHERIFF'S OFFICE

34. Property (Code in appendix C)					Tot Value: \$ 1880.		Case No: [REDACTED]						
#	Brand	Model	Serial No	Prop Class	Prop Value	Prop Stat	Prop Code	Qty of Items	Size	Color	Dang	Act	Off
1				S	100.	1	512	1	7	GLD	0	N	1
Property Type: ring				Additional Description: blue tanz w/ fire diamonds on each side									
2				S	100.	1	512	1	8	GLD	0	N	1
Property Type: ring				Additional Description: Brows of ten diamonds - 10 Kt. gold band									
3				S	50.	1	512	1	7	GLD	0	N	1
Property Type: ring				Additional Description: small size gold nugget ring									
4				S	50.	1	512	1	7	GLD	0	N	1
Property Type: ring				Additional Description: leaf and acorns on it (black hills gold)									
5				S	20.	1	509	1	9	SLV	0	N	1
Property Type: class ring				Additional Description: Silver w/ blue stone says "ICS" "98"									
6				S	100.	1	506	1	18"	GLD	0	N	1
Property Type: necklace				Additional Description: fingeron style gold chain									
7				S	50.	1	512	1	7	GLD	0	N	1
Property Type: ring				Additional Description: C.Z. Solitaire 2Kt.									
8	NEC	message maker II	040828978AY	S	20	1	302	1	7	BLK	0	N	1
Property Type: pager				Additional Description:									
9	Sega	Genesis		S	50.	1	349	1	7	BLK	0	N	1
Property Type: TV Game				Additional Description: w/ two black controllers									
10				S	50.	1	314	1	7	BLK	0	N	1
Property Type: Boom Box				Additional Description: cassette player, CD Player detachable speakers									
11	Emerson			S	100.	1	323	1	7	BLK	0	N	1
Property Type: VCR				Additional Description: 4 head (from Walmart)									
12	Zenith			S	100.	1	323	1	7	BLK	0	N	1
Property Type: VCR				Additional Description: 2 heads									
13	Belkin	FA004600		S	30.	1	319	1	7	WHT	0	N	1
Property Type: power cord				Additional Description: for the printer to connect to the computer									
14	Hewlett Packard	ScanJet 3000	CN8CYIE8S4	S	100.	1	349	1	7	WHT	0	N	1
Property Type: computer scanner				Additional Description: Hewlett Packard other model # C7167A									
15		Amck62400		S	100.	1	305	1	7	WHT	0	N	1
Property Type: Computer tower				Additional Description: Item # 1211(w) 2NN w/ floppy + hard drive									
16	BTC	40X	M84015878 or 75362201143	S	50.	1	349	1	7	WHT	0	N	1
Property Type: CD Rom DRIVE				Additional Description: Windows 95+98 other # 6063886250 on box									
17				S	50	1	349	1	7	WHT	0	N	1
Property Type: Computer Printer				Additional Description:									
18	BSC	SP-120		S	30.	1	349	2	7	WHT	0	N	1
Property Type: Computer Speakers				Additional Description: other # AC110V on box, 120 watt									
19				S	50.	1	349	1	7	WHT	0	N	1
Property Type: Computer Monitor				Additional Description: 15" SCREEN									
20	Logitech			S	20.	1	349	1	7	white	0	N	1
Property Type: Computer Mouse				Additional Description:									
21	BTC	5121W	390205369	S	50.	1	349	1	7	white	0	N	1
Property Type: Computer Keyboard				Additional Description: 1011 Enhance 1									

SUPPLEMENTAL PROPERTY REPORT - MANATEE COUNTY SHERIFF'S OFFICE

34. Property (Code in appendix C)		Tot Value: \$		Case No.									
#	Brand	Model	Serial No	Prop Class	Prop Value	Prop Stat	Prop Code	Qty of Items	Size	Color	Damg	Act	Off
22	Nokia	2190		S	100.	1	999	1	\	black	0	N	I
Property Type: cell phone				Additional Description: through Aerial, has no chip in it									
23	Nokia	2190		S	100.	1	999	1	\	black	0	N	I
Property Type: cell phone				Additional Description: through Aerial w/black cover abnrt#226									
24				S	50.	1	321	1	\	black	0	N	I
Property Type: cordless telephone				Additional Description:									
25	Sanyo	CT-677		S	100.	1	321	1	\	black	0	N	I
Property Type: cordless telephone				Additional Description: caller I.D. on handset + handset speaker									
26	Sanyo			S	10.	1	999	1	\	white	0	N	I
Property Type: caller I.D. Box				Additional Description:									
27	Sony	Walkman	FX421	S	10	1	323	1	\	Blk	0	N	I
Property Type: cassette player				Additional Description: wear phones + AM/FM radio									
28				S	20.	1	319	1	\	Blk	0	N	I
Property Type: CD Player				Additional Description: walkman type wearphones									
29	Disney			S	15.	1	324	1	\	Blk	0	N	I
Property Type: VCR Movie				Additional Description: The Lion King									
30	Disney			S	15.	1	324	1	\	Blk	0	N	I
Property Type: VCR Movie				Additional Description: Mulan									
31	Disney			S	15.	1	324	1	\	Blk	0	N	I
Property Type: VCR Movie				Additional Description: Beauty and The Beast									
32	Disney			S	15	1	324	1	\	Blk	0	N	I
Property Type: VCR Movie				Additional Description: The Fox and The Hound									
33	Disney			S	15	1	324	1	\	Blk	0	N	I
Property Type: VCR Movie				Additional Description: Snow White and the Seven Dwarfs									
34	Disney			S	15.	1	324	1	\	Blk	0	N	I
Property Type: VCR Movie				Additional Description: The Great Mouse Detective									
35	Disney			S	15.	1	324	1	\	Blk	0	N	I
Property Type: VCR Movie				Additional Description: The Little Mermaid									
36	Disney			S	15.	1	324	1	\	Blk	0	N	I
Property Type: VCR Movie				Additional Description: The Little Rascals									
37		Digital		S	20.	1	301	1	\	Blk	0	N	I
Property Type: Answering Machine				Additional Description: bar code# 065053090548 from WalMart									
38	Sega	Genesis		S	20.	1	349	1	\	Grey	0	N	I
Property Type: TV Game Cartridge				Additional Description: Jurassic Park									
39	Sega	Genesis		S	20.	1	349	1	\	Grey	0	N	I
Property Type: TV Game Cartridge				Additional Description: Family Feud									
40	Sega	Genesis		S	20.	1	349	1	\	Grey	0	N	I
Property Type: TV Game Cartridge				Additional Description: The Lion King									
41	Sega	Genesis		S	20.	1	349	1	\	Grey	0	N	I
Property Type: TV Game Cartridge				Additional Description: Clue									
Property Type:				Additional Description:									



SUPPLEMENTAL WITNESS/VICTIM REPORT

Case No. [REDACTED]

Pers Type	Pers No	Pers 2	20. Pers Type	V victim	1 juvenile	3 adult	5 government	9 other	J juvenile
0	3	0	W witness	O other	2 officer	4 business	6 church		
22. Name (last, first, middle, initial)			Sex	Race	B black	Date of Birth			
[REDACTED]			M Male F Female	N n/a U unknown	W white	I amer indian O oriental U unknown	[REDACTED]		
Age	Height	Weight	Hair	Eyes	23. Offense Indicator				
23			B R N		1 offense 3 both 2 offense				
24. Injury Extent			25. Injury Type			26. Address			
0 n/a 1 minor 2 serious 3 fatal	0		00 n/a 01 shot 02 stab 03 cut 04 unconscious 05 broken bone	06 internal 07 loss of teeth 08 burns 09 bruises 99 other		0000			
27. Residence Type			28. Residence Status			29. Occupation/Employer			
0 n/a 1 city 2 county 3 florida 4 out-of-state	2		0 n/a 1 full year 2 part year 3 non-resident	1		NONE			
30. Victim/Offender Relationship			31. Injury Type			32. Transported By			
00 n/a 01 unknown 02 stranger 03 spouse 04 ex-spouse 05 co-habitant 06 parent 07 brother/sister 08 child 09 step-parent 10 step-child 11 in-law 12 other family 13 student 14 teacher 15 child of boy/girl friend 16 boy/girl friend 17 friend 18 neighbor 19 sitter 20 employee 21 employer 22 landlord/tenant 23 acquaintance 99 other	00								

33. Witness/Victim Interview

She and her sister [REDACTED] left the house, with the front door unlocked, at about 1:30 PM today. They went to their mom's hairshop and shopping. They returned home at about 6:10 PM to find the garage door opened about five inches. They looked in the house and saw a few things missing. She called her mom at work, then her mom had her call the police. The cigarette butt was hers.

Pers Type	Pers No	Pers 2	20. Pers Type	V victim	1 juvenile	3 adult	5 government	9 other	21. A adult J juvenile
0	1	0	W witness	O other	2 officer	4 business	6 church		
22. Name (last, first, middle, initial)			Sex	Race	B black	Date of Birth			
[REDACTED]			M Male F Female	N n/a U unknown	W white	I amer indian O oriental U unknown	[REDACTED]		
Age	Height	Weight	Hair	Eyes	23. Offense Indicator				
14			B R N		1 offense 3 both 2 offense				
24. Injury Extent			25. Injury Type			26. Address			
0 n/a 1 minor 2 serious 3 fatal	0		00 n/a 01 shot 02 stab 03 cut 04 unconscious 05 broken bone	06 internal 07 loss of teeth 08 burns 09 bruises 99 other		0000			
27. Residence Type			28. Residence Status			29. Occupation/Employer			
0 n/a 1 city 2 county 3 florida 4 out-of-state	2		0 n/a 1 full year 2 part year 3 non-resident	1		NONE			
30. Victim/Offender Relationship			31. Injury Type			32. Transported By			
00 n/a 01 unknown 02 stranger 03 spouse 04 ex-spouse 05 co-habitant 06 parent 07 brother/sister 08 child 09 step-parent 10 step-child 11 in-law 12 other family 13 student 14 teacher 15 child of boy/girl friend 16 boy/girl friend 17 friend 18 neighbor 19 sitter 20 employee 21 employer 22 landlord/tenant 23 acquaintance 99 other	00								

33. Witness/Victim Interview

She went with [REDACTED] to see her mom and to the Goodwill store. When she and Tara got back home, they went in the front door and saw the magazines dumped out on the floor. Tara called their mom at work. She said no one in the family smokes in the house. The cigarette butt must have been the burglar's.

CASE STATISTICS REPORT - MANATEE COUNTY SHERIFF'S OFFICE

☐ Murder
 ☐ Robbery
 ☐ Agg Aslt/Bat
 ☒ Burgl
 ☐ G/T
 ☐ Veh Thft
 ☐ Arson
 ☐ Fraud
 ☐ Sex Off
 ☐ Kidnap

Case No. [REDACTED]

CASE STATIS- TICS/ METH- OD OF OP- ER- ATION	149. Object/Target	Residential 002 attic 003 basement 004 bathroom	005 bedroom 006 den/family room 007 garage/carport 008 kitchen	009 living room 010 storage area 011 person 012 other	Non-Residential 014 cash register/drawer 015 display items 016 safe box	017 storage area 018 vending mach 019 person 020 other	05
	150. Entry Point	001 ground 002 upper 003 front 004 garage	005 rear 006 side 007 a/c opening/duct 008 door	009 floor 010 roof 011 skylight 012 sliding glass door	013 trunk/hood-vehicle 014 wall/meter room 015 window/jalousie 016 window/other	017 other 018 unknown	1 03 2 08 3
	151. Exit Point	019 ground 020 upper 021 front 022 garage	023 rear 024 side 025 a/c opening/duct 026 door	027 floor 028 roof 029 skylight 030 sliding glass door	031 trunk/hood-vehicle 032 wall/meter room 033 window/jalousie 034 window/other	035 other 036 unknown	1 21 2 26 3
	152. Tool Used	19 axe/saw 20 glass cutter 21 glass/razor/scissors 22 knife/ice pick 23 electrical/mechanical 24 explosives	25 firebomb 26 gasoline/kerosene 27 open flame 28 trailing 29 bat/board 30 bottle	31 brass knuckles/numchuck 32 chain/club 33 pipe/tire iron 34 rock/brick 35 sledge hammer/hammer 36 bolt/wire cutter	37 channel lock pliers 38 chisel 39 drill 40 gas torch 41 lock-pick/key 42 pry bar/screwdriver	43 rope/cord 44 slammer 45 other	1 2 3
	153. Entry Method	General 02 admitted in 03 attempted only 04 no forced entry	Door 05 cut 06 kicked/broke open 07 lifted off track 08 pried 09 punched/cut lock 10 took off hinges 11 unlocked/picked	Window 12 broke/smashed 13 carried off 14 left open 15 opened 16 previously broke 17 pried open 18 removed 19 replaced 20 stacked	Security 21 crawled between 22 cut 23 pried	Wall/Ceiling 24 burned 25 chopped/sledged 26 drilled 27 open vent/duct 28 sawed 29 other	1 04 2 3
	154. Did Security Prevent or Apprehend	Y yes N no	155. Victim Activity	02 about to enter home 03 about to enter vehicle 04 asleep at home 05 at funeral 06 at school 07 at work 08 enter/leave bank 09 gambling	10 hitchhiking 11 jogging 12 leave rest/bar 13 leave shopping mall 14 open/close business 15 out of town 16 shopping 17 using ATM machine	18 using elevator 19 using public restroom 20 waiting for bus 21 other 22 unknown	07
	156. Physical Evidence	01 fingerprints 02 glove prints 03 foot prints	04 tire tracks 05 tool marks 06 paint	07 soil 08 glass 09 hair	10 fiber 11 body fluids 12 clothing	13 cig butts 14 none 15 other	01 157. Removes Prop In 02 brought bag 03 paper bag 04 pillowcase 05 pocket 06 oth 23 unk
	158. Illumination	01 flashlight 02 pen light 03 candle 04 matches	05 light on premise 06 spotlight 07 other 08 unknown	05	159. Prior Acts 02 answered ad 03 called on phone 04 followed in veh 05 followed on foot 06 loitered in area 07 stood at bus stop	08 used drugs/alcohol 09 used trickery 10 give aid/directions 11 candy/food/drink 12 drugs/liquor 13 employment/money 14 restroom/telephone 15 ride 16 sex 17 other 18 unknown 19 hid in building 20 hid in vehicle	1 21 2 3
	160. Subject Acts	03 defeated alarm 04 defecated/urinate 05 disabled phone 06 familiar w/premise 07 gagged/blindfold	08 jumped counter 09 locked victim in 10 prostitution involved 11 ransacked premise 12 restrained/tied victim	13 set fire 14 armed 15 threw away key 16 turned light on/off 17 use candles/match	18 used facilities 19 used flashlight 20 used forklift 21 vandalized 22 wiped prints	1 22 2 3	
	161. Type Weapon	04 double barrel 05 machine gun 06 revolver 07 rifle 08 sawed off	09 shotgun 10 axe/saw 11 glass cutter 12 glass/razor/scissors 13 knife/ice pick	14 electrical 15 explosives 16 firebomb 17 gasoline/kerosene 18 open flame	19 trailing 20 bat/board 21 bottle 22 brass knuckles 23 chain/pipe	24 pipe/tire iron 25 rock/brick 26 sledge/hammer 27 other	1 2 3
	162. How Used	04 fired weapon 05 held in left hand 06 covered weapon 07 displayed in belt	08 fired weapon 09 implied weapon 10 laid on counter	08 placed to victim 09 pointed at victim 10 shot victim 11 struck victim	15 burned w/fire 16 stabbed/cut 17 struck with 18 threatened	19 vehicle 20 drugged victim 21 kicked 22 knocked down 23 snatched 24 strangled 25 struck w/fist 26 verbal 27 other	1 2 3
	163. Firearm Color	013 blue/black 014 chrome/nickel 015 stainless 016 other	164. Impersonate	05 drunk 06 employee/client 07 delivery man 08 disabled motorist	09 officer 10 opposite sex 11 renter 12 repairman	13 salesperson 14 seeking someone 15 selling illegal 16 survey taker 17 other	1 2 3

OTHER LOCATION _____

MANATEE COUNTY SHERIFF'S OFFICE
PROPERTY & EVIDENCE

CASE NO.	[REDACTED]
TYPE OF CASE:	<i>Allegation</i>
INV. NO.:	<i>21</i>

TRIAL <input type="checkbox"/> LAS <input type="checkbox"/>		RECOVERED PROP <input type="checkbox"/>	DATE/TIME OF IMPOUND		ADDRESS OF IMPOUNDMENT								
SAFEKEEPING <input type="checkbox"/>		DESTROY <input type="checkbox"/>	6-10-99/00										
OWNER:			ADDRESS:				ZIP:		PHONE:				
FINDER:			ADDRESS:				ZIP:		PHONE:				
SUBJECT/DEFENDANT			ADDRESS:				ZIP:		PHONE:				
RELEASE TO OWNER <input type="checkbox"/> Date:			N.C.I.C. CHECK Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				DETECTIVE ASSIGNED TO CASE:						
Owner:			Hit <input type="checkbox"/> Agency:				CCA						
#	# Items	Property Type	Brand	Model	Serial No.	Prop Class	Prop Value	Prop Stat	Prop Code	Size	Color	Dmg	Drug
1	1	Cigarette	Norwalk			E	1.7	20		101	O	N	
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
Additional Desc.						Property Location:							
DO YOU WISH TO CLAIM THIS PROPERTY: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>						SIGNATURE IMPOUNDING DEPUTY: A. Watson							
Signature:						I.D.: DRD DIVISION: PAT SQUAD/UNIT: SBX							

[illegible]

[REDACTED]

[REDACTED]

November 15, 1999

RECEIVED

NOV 23 1999

Manatee Sheriff's Office
515 11th Street West
Bradenton, Florida
U.S.A. 34205

PERSONNEL SECTION

Attention: Sheriff or
Officer-in-Charge

Dear Sirs:

This letter is to commend two of your Deputies for assistance provided to the undersigned and my wife, [REDACTED] on a recent visit to Florida. On October 20, 1999, while on route from Tampa Airport to Sarasota, by taxi, we became disabled on Interstate 75. The taxi operator, a Russian, was uncommunicative and unhelpful in attempting to help us complete the trip to Sarasota. The weather was inclement, traffic was moderately heavy, and we were, in effect, stranded for approximately an hour and a half with no relief in sight. In addition, all our luggage and belongings were within the trunk compartment of the taxi and, as we found out, the taxi operator could not or would not open the trunk to provide our luggage to us.

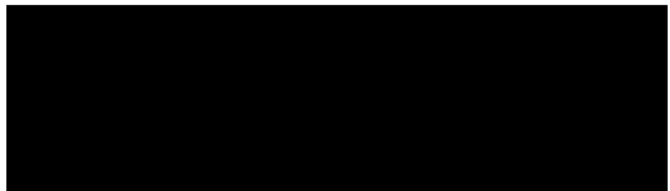
Having reached a high level of agitation, we were fortunate enough to be observed by one of your Deputies (Deputy Watson) who stopped and, after some discussion, brought a measure of relief to [REDACTED] and myself. She readily agreed to assist us in transporting us to a nearby exit or rest stop, however, the taxi operator continued to be uncooperative. Deputy Grinder, another officer, also arrived and was equally helpful.

Finally, both Deputy Grinder and Deputy ^{APRIL}Watson assisted us in recovering our luggage and transporting us to a nearby restaurant where we were able to obtain transportation to our destination.

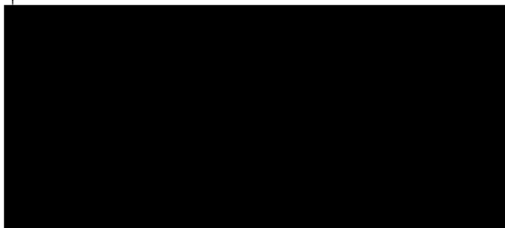
Having travelled all day from Saint John, New Brunswick, Canada, and finding ourselves in an unfamiliar situation with a taxi operator who was unable or unwilling to provide real assistance, it was a pleasure to be rescued by Deputies Watson and Grinder who both provided very significant relief to my wife and to me.

Would you kindly convey to Deputies Watson and Grinder our appreciation for their assistance and perhaps retain this letter as part of their record with your Department.

Yours very truly,



RBC:djp



23

Deputy April Watson
515 W. 11th St.
Bradenton Fl. 34205

FEB 29 2000
MSO MAIL

Your kindness
was appreciated
very much.

You were certainly
a welcome sight!
I thank so much
- Mary Miller





CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

March 23, 2000

Dear Mr. and Mrs. [REDACTED]

I received your lovely card today. I am appreciative of your thoughtfulness. The Manatee County Sheriff's Office policy and procedures prohibits agency personnel from accepting gratuities. With this in mind, I am returning your generous gift, but am grateful for the card and picture.

It is a rewarding part of my job to assist and meet nice people like yourselves.

Sincerely,

CHARLES B. WELLS, SHERIFF
MANATEE COUNTY, FLORIDA

Dep. A. Watson # 086
Deputy April Watson
Patrol Division, Squad 4E

aw

An Accredited Agency



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, FL 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 748-5682
Administrative/Executive (941) 749-5401

TO: Deputy April Watson

THRU: Sgt. Gibson
Lt. Baroncelli
Captain Hagaman

FROM: Captain Larry Murphy *LM*

DATE: May 12, 2000

SUBJECT: Letter of Appreciation

RECEIVED
MAY 16 2000
PERSONNEL SECTION

On 2/19/2000 you conducted an on-scene investigation of a burglary at [REDACTED]
[REDACTED] As part of your investigation, you identified and lifted latent prints from the crime scene.

Because of your determination and extra effort, a suspect has been developed in this case and will almost certainly be arrested and convicted for this offense. For this, you have the gratitude of the entire Criminal Investigation Division.

Please accept my personal thanks for a job well done.

LM/scd

cc: Personnel



MANATEE COUNTY SHERIFF'S OFFICE
ROUTING SLIP



TO	COMPONENT	ACTION
		<input type="checkbox"/> Approval
		<input type="checkbox"/> Signature
		<input type="checkbox"/> Comment
		<input type="checkbox"/> See Me
		<input type="checkbox"/> As Requested
		<input type="checkbox"/> Information
		<input type="checkbox"/> Read & Return
		<input type="checkbox"/> Read & File
		<input checked="" type="checkbox"/> Necessary Action
		<input type="checkbox"/> Investigate
		<input type="checkbox"/> Recommendation
		<input type="checkbox"/> Prepare Reply
Personnel		
2-22-01		

Remarks

PLEASE ADD THIS
INFO. TO DEPT. A. DUGAN'S
PERSONNEL FILE

Sgt. D. Townsend
PATROL 03 SQ 6
RECEIVED
FEB 23 2000
PERSONNEL SECTION

PUT ANY ADDITIONAL REMARKS ON THE REVERSE SIDE

**MANATEE COUNTY SHERIFF'S OFFICE
INTEROFFICE MEMORANDUM**

TO: Major Brad Steube
Captain Connie Shingledecker

THRU: Major James Foy
Captain Mike Mayer

FROM: Lt. Daryl Brown

DATE: February 9, 1998

SUBJECT: Prostitution Reverse Job Well Done

On Friday, February 6, 1998 the Delta Task Force, with the assistance of the Corrections Bureau, Investigative Bureau, Enforcement Bureau, and the COP's Unit conducted a reverse prostitution sting operation at the [REDACTED]. The operatives used for this reverse were Deputy April Dugan, Deputy Christine Thomason, Deputy Sally Cardenas, and Detective Kim Smith.

I want to express a special "Thank You" for the work these deputies did. It was a cold, rainy, windy and miserable day. Even though they tried to stay out of the wind and rain they still got wet, but it didn't matter, they continued to work hard without complaining. After a 10 hour operation was complete, 50 people had been arrested. Most of these arrests were the direct result of the operatives and their dedication to their work and this operation. They deserve a special "Thank You" for their work on that day and a "Job Well Done".

These operations are only a success because of the cooperation between the Corrections, Investigative, and Enforcement Bureaus. Thank you for the assistance.

Cc: Deputy April Dugan
Deputy Christine Thomason
Deputy Sally Cardenas
Detective Kim Smith

/DB

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

To: Deputy April Watson

Thru: Lieutenant R. Walker
Sergeant C. Gibson

From: Sgt. Bill Jordan *WJ*

Date : September 19, 1998

Subject : Letter of Appreciation

I would like to extend my thanks to Deputy Watson and Deputy Roberts for their roll in a recent Prostitution Sting. Deputy Watson and Deputy Roberts were willing to assist not only myself but also the entire Delta division. Deputy Watson and Deputy Roberts posed as Prostitutes and tried to pick up prospected Johns in the target area. Deputy Watson and Deputy Roberts were very successful in this position. We were able to arrest 28 Johns in about 6 hours.

The success of this mission was only accomplished with the help and dedication of these two fine Deputies. Keep up the good work.

Cc

File

**MANATEE COUNTY SHERIFF'S OFFICE
MEMORANDUM**

TO: Deputy A. Watson

THRU: Lt. Walker
Sgt. Andress

FROM: Captain J. C. Hagaman *JCH*

DATE: June 08, 1999

Mr. [REDACTED] called on today's date to express his gratitude on the investigation being done by you. He stated you have gone above and beyond duty to help them with a theft problem they have been having at his place of business (junkyard).

It is always nice to hear a victim compliment a Deputy on a job well done and should not go unnoticed.

Keep up the good work!

•

JCH/yfg

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDA

RECEIVED
OCT 22 2003
PERSONNEL SECTION


TO: Detective April Dugan

THRU: Captain Kris Ministral
Lieutenant Dennis Dummer
Sergeant Ed Norris

FROM: Major Constance K. Shingledecker *CKS*
Chief, Investigative Bureau

DATE: October 21, 2003

SUBJECT: Appreciation

 Superintendent of Sarasota Christian School, 5415 Bahia Vista Street, Sarasota, mailed the office a letter to "thank you" and Detectives Kathy Estabrook and Marc Newman for demonstrating great sensitivity and thoroughness in your investigation after the arrest of one of their teachers.

Please accept my sincere appreciation for your dedication to duty. The Manatee County Sheriff's Office is fortunate to have an employee of your caliber.

CKS/jl

Attachment

cc: Personnel



Sarasota Christian School

October 16, 2003

Min Shingledacker

Manatee County Sheriff's Office
515 11th Street West
Bradenton, FL 34205

To Whom It May Concern:

Sarasota Christian School has just gone through one of the most difficult times in our history with the arrest of one of our teachers. As we went through this unpleasant process, it became evident to me that we are served by very competent and helpful law enforcement officers. Kathy Estabrook, Marc Newman, and April Dugan demonstrated great sensitivity and thoroughness in their investigation of this case.

I'm grateful for your work in the community and will continue to pray for God's wisdom and blessing to rest upon all of you. Thank you for your service.

Sincerely,


Superintendent
Sarasota Christian School

"Valuing the Difference"

5415 Bahia Vista Street • Sarasota, Florida 34232 • Phone: (941) 371-6481 • Fax: (941) 371-0898

**MANATEE COUNTY SHERIFF'S OFFICE
INTER OFFICE MEMORANDUM**

TO: Detective April Dugan

THRU: Captain K. Minisrol
Captain P. Bartholomew
Lieutenant W. Jordan
Lieutenant D. Dummer
Sergeant E. Norris

FROM: Sergeant A. Carr

DATE: February 21, 2004

SUBJECT: LETTER OF APPRECIATION

RECEIVED
FEB 24 2004
PERSONNEL SECTION

On February 20, 2004 the Tactical Unit of Special Investigations was conducting a Prostitution Reverse. You assisted the unit by portraying the "decoy" for this operation.

As a result of your efforts the unit was able to effectively arrest twelve subjects for the solicitation of prostitution. One of the subjects arrested received and additional charge of possession of marijuana less than 20 grams.

I would like to take the time to thank you personally for you assistance with this operation. I look forward to working with you again in the future.

C.c. Personnel



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, FL 34205-7727
Telephone (941) 747-3011

Fax Numbers
SID (941) 721-6510
Administrative/Executive (941) 749-5401

To: Deputy April Dugan

Thru: Captain Dan Kaufman
Captain Patrick Bartholomew
Lieutenant William Jordan
Lieutenant William Vitaioli
Sergeant K. B. Huff

From: Sergeant Robert Mealy *RM*

Date: August 30, 2004

Subject: Letter of Appreciation

RECEIVED

AUG 31 2004

PERSONNEL SECTION

On 08/27/04, you assisted the Special Investigations Division with a prostitution reverse located at the 3800 block of 14th Street West. Because of your efforts, we were able to effectively arrest eleven (11) individuals. Other charges also resulted because of these arrests.

For this, you have the gratitude of the entire Special Investigations Division.


Please accept my personal thanks for a Job Well Done.

CC: Personnel

An Accredited Agency

**MANATEE COUNTY SHERIFF'S OFFICE
CORRECTIONS BUREAU**

MEMORANDUM

TO: Deputy April Dugan
THROUGH: Captain John Hagaman
Lt. Daryl Brown
Sgt. Marty Stanley
FROM: Major John Potts 
DATE: May 30, 2001
SUBJECT: Letter of Appreciation

RECEIVED
JUN 04 2001
PERSONNEL SECTION

During the recent Operation Lockup held between May 1 and May 15, 2001, the Patrol Division was given the task of locating and arresting wanted subjects in Manatee County.

Because of your determination and extra efforts, the operation was a success.

Please accept my personal thanks for a job well done. Keep up the good work!

JP/cje

cc: Personnel

MANATEE COUNTY SHERIFF'S OFFICE
MEMORANDUM

COPY

TO: Deputy A. Dugan

THRU: Captain J. Hagaman *JH*
Lieutenant G. Stroup *GS*

FROM: Sergeant D. Townsend *DT*
Sergeant M. Decesare *MD*

DATE: September 19, 2001

SUBJECT: Letter of Appreciation

RECEIVED
SEP 27 2001
PERSONNEL SECTION

On Friday, September 14, 2001, you were assigned to work a special shift for the Patrol Division, District 3, as the result of Tropical Storm Gabrielle. Without your assistance to the deputies of Patrol Squad 6 East, we most certainly would not have been able to respond to all of the calls for service in a timely manner. Squad 6 East is grateful for your professional assistance.

50th Anniversary


**MANATEE
GLENS**

"When Life Hurts
...Manatee Glens
is Here to Help."

Access Center
Admissions & Behavioral
Health Emergencies
PH: (941) 782-4617

Administrative Offices
PH: (941) 782-4299

Manatee Glens Hospital
Crisis Unit
PH: (941) 782-4600

Addiction Center
PH: (941) 782-4797

Adolescent Recovery
Center (ARC)
PH: (941) 782-4840

Counseling Services
Sixth Avenue
PH: (941) 782-4100

Manatee Glens
Medical Group
PH: (941) 782-4618

Employee Assistance
Program (EAP)
PH: (941) 782-4379

Safe Children Coalition
PH: (941) 721-7670



A United Way
Member Agency



January 12, 2006

Charlie Wells, Sheriff
515 11th Street West
Bradenton, Florida 34205

RE: DEPUTY APRIL DUGAN

Dear Sir:

On January 10, 2005 a four month pregnant female was sexually assaulted and beaten.

I meet Deputy Dugan and the victim in the emergency room at Manatee Memorial Hospital. There were patients waiting to be seen in the waiting area over ten hours. During this wait the victim became obnoxious to the nursing staff.

Deputy Dugan immediately responded to the victim with a high professionalism that returned security and self worth to the victim. She stayed at the victims' side continuously supporting her. Deputy Dugan's extraordinary patience, empathy and expertise with the victim was no less then excellent. She truly is the best example of law enforcement at its very best.

Please thank Deputy Dugan for performing excellently, a most difficult task.

Sincerely yours,

Victim Advocate

■ PO BOX 9478, Bradenton, FL 34206-9478

JCAHO Accredited ■ A Not-for-Profit Mental Health and Addiction Treatment Provider since 1955

Celebrating 50 Years of Service to our Community

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDA

TO: Deputy April Dugan

THRU: Captain Ron Couch
Lieutenant Anthony Carr

FROM: Major John C. Hagaman *JCH*
Chief, Enforcement Bureau

DATE: January 5, 2006

SUBJECT: Appreciation

RECEIVED
JAN - 5 2006
PERSONNEL

We received a letter from [REDACTED] in reference to purse being stolen at J.C. Penney's. She advised that the Deputies who responded were professional, compassionate and confident that they would recover her belongings. With the help of citizens, who obtained a tag number, her belongings were recovered and she was elated.

Please accept my sincere appreciation for your dedication to duty and commitment to the community. The Manatee County Sheriff's Office is fortunate to have an employee of your caliber.

JCH/yfg

Attachment

cc: Personnel

To Sheriff Wells & Deputies, "1000" M. H. Haqam

On December 27th, my purse was stolen at J.C. Penny's (# [REDACTED]). The deputies that responded were so professional, compassionate and assured me they would get him shortly. (A couple followed the car and got his tag number!!). I can't say enough to let the officers involved ^{that} helped me through such a "violation."

Then, when I was cancelling my credit cards, [REDACTED] tried to use one of my credit cards twice. The next day I went to the Sheriff's office and filed another complaint against him for attempting to use my credit card. (# [REDACTED] Officer. Alanna was so helpful & polite).

You should be extremely proud of these officers as they
FANTASTIC!!

Sincerely Grateful,
[REDACTED]

Just a kind word
of Thanks
for everything
that you've done.

[REDACTED]

RECEIVED

MANATEE COUNTY SHERIFF'S OFFICE JAN 18 2006

PERSONNEL

MEMORANDA

TO: Deputy April Dugan

THRU: Captain Ron Couch
Lieutenant John Baroncelli

FROM: Major John C. Hagaman *JCH*
Chief, Enforcement Bureau

DATE: January 12, 2006

SUBJECT: Appreciation

We received a letter from [REDACTED] Manatee Glens, in reference to your response to the pregnant female who was sexually assaulted. Ms. [REDACTED] advised that you showed the victim great support and professionalism.

Please accept my sincere appreciation for your assistance to this victim.

JCH/yfg

Attachment

~~CONFIDENTIAL~~



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, FL 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 721-6753
Administrative/Executive (941) 749-5401

TO: Deputy A. Dugan

THRU: Sgt. S. Felton
Lt. J. Baroncelli

FROM: Captain Ron Couch
Commander, Patrol D3

DATE: November 17, 2006

SUBJECT: Letter of Commendation

On October 7th, 2006 Deputies Hernandez, Cappiello and Sgt. Felton were dispatched to a disturbance at [REDACTED] in which the dispatcher advised that someone may have been stabbed. Upon their arrival they came across a male subject sitting on the sidewalk holding two knives and threatening to stab himself. Just as they made contact with the subject, Deputy Dugan pulled up. The subject said that he wanted to talk to a female deputy. Sgt. Felton asked Deputy Dugan to speak with the subject, which she did. Sgt. Felton began to speak with the subject's wife and Deputy Hernandez and Cappiello stayed with Deputy Dugan. Deputy [REDACTED] arrived and was able to position himself on the south side of the hotel. The subject was very belligerent and continuously cursed at Deputy Dugan, but she was able to remain calm during the entire incident. Deputies Dugan, Cappiello and Hernandez showed great restraint during the incident and did not agitate the subject anymore than he already was. Sgt. Felton stayed with the wife and attempted to gain information on the subject and his mental state. Sgt. Townsend arrived and began to set up a tactical plan. Sgt. [REDACTED] arrived and a plan was put into place to try and disarm the subject by using non-lethal weapons. During the conversation, Deputy Dugan was able to talk to the subject into throwing down one of his knives. Deputies [REDACTED] and [REDACTED] arrived to assist with the takedown. Deputies [REDACTED] and Sergeants [REDACTED] and Townsend set up on the south side of the hotel, several feet away from the subject. When the subject leaned forward towards Deputy Dugan, his back was entirely turned away from the takedown team. At this point Sgt. [REDACTED] fired two bean-bag rounds at the subject, which hit him in the back and Deputy [REDACTED] fired the probes from his ECW into the subject. The subject was immediately incapacitated and taken into custody without harming himself or others. The subject was subsequently Baker Acted and transported to Manatee Memorial Hospital. The actions of these deputies in a highly volatile and potentially life threatening incident epitomizes their dedication, teamwork and professionalism.

cc / personnel file



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, FL 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 721-6753
Administrative/Executive (941) 749-5401

To: Deputy April Dugan

Thru: Captain Dennis Dummer
Lieutenant William Evers
Sergeant Fred Liedke

From: Lieutenant Anthony Carr

Date: January 22, 2007

Subject: Letter of Appreciation

On 10/20/2006, you conducted an investigation of a Burglary at [REDACTED]
[REDACTED] The MSO Case Number was [REDACTED] During
your investigation you identified and lifted latent prints from the crime scene.

Because of your determination and extra effort, a person of interest has been developed in this case. For this you have the gratitude of the entire Criminal Investigation Division.

Please accept my personal thanks for a Job Well Done.

CC: Personnel

RECEIVED
JAN 24 2007
PERSONNEL



W. BRAD STEUBE
Sheriff
MANATEE COUNTY, FLORIDA



600 US Highway 301 Blvd. West
Suite 202
Bradenton, FL 34205
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 744-3792
Administrative/Executive (941) 749-5401

To: Deputy April Dugan

Thru: Captain Ron Couch
Lieutenant Stan Schaeffer

From: Lieutenant D. Richie Cunningham

Date: March 18th, 2007

Subject: Letter of Appreciation

You conducted an investigation of a Residential Burglary, case # [REDACTED]
During your investigation you identified and lifted latent prints from the crime scene.

Because of your determination and extra effort, a person of interest has been developed in this case. For this you have the gratitude of the entire Criminal Investigation Division.

Please accept my personal thanks for a Job Well Done.

CC: Personnel

RECEIVED
MAR 24 2008
PERSONNEL

Manatee County Sheriff's Office

Memorandum

RECEIVED
APR 28 2009
PERSONNEL

To: Detective April Dugan
Thru: Sergeant P. Spear
From: Lieutenant T. Shear
Date: April 27, 2009
Subject: Letter of Appreciation

On March 28, 2009, a twelve-year-old juvenile got into a verbal argument with her grandmother and ran away from her home causing a great deal of concern for her safety. Detective Sellitto initiated a "Media Alert" to help in locate the juvenile.

On March 29, it was discovered that the juvenile could be in grave danger because she was observed, by witnesses, getting into a red Jeep vehicle driven by a white male with glasses. With this new critical information the Media Alert was elevated to an Amber Alert. Detectives' Dugan, Finley, Hottman, Wischer, and P. Smith were called in to assist Detective Sellitto. Detective Kim Zink was contacted and immediately began checking sex offender and predator profiles. The detectives quickly worked on leads and continued their aggressive search for the missing juvenile. At approximately 1630 hours the juvenile returned home and was immediately debriefed by detectives. The juvenile was not forthcoming with information about what happened or about the suspect. Detectives were persistent and were eventually able to establish a trusting rapport with the juvenile and obtained the critical information about what occurred. It was learned that the suspect's name was [REDACTED] and that he lived near a body of water in either an apartment or condo. It was learned that the suspect, [REDACTED] committed several crimes and eventually dropped her off within a mile of her residence after discovering that MSO was looking for her.

The Crimes Against Children Team, led by lead Detective Todd Sellitto, stayed vigilant and searched for the suspects residence based upon the juveniles description. Detectives began to search apartment and condominium complexes within Manatee County for the suspect's vehicle. After a few hours, Detective Sellitto located the suspect's vehicle and condo. Detectives acted swiftly and immediately began surveillance on the residence, while others began to write a search warrant. The suspect came out of his residence carrying several DVDs and appeared to be leaving forcing the detectives to confront him. The suspect was taken into custody and interviewed about the incident. After a lengthy interview the suspect confessed to the criminal acts and was taken to the jail. The CAC Team continued to work throughout the early morning hours and executed a search warrant at the suspect's residence.

Detectives' Finley, Dugan, Sellitto, Smith, Hottman, Wischer and Zink worked throughout the day and night and demonstrated dedication, professionalism, and above all else teamwork to safely recover the juvenile and apprehend the suspect. A job well done to all of them!

cc: Personnel



W. BRAD STEUBE
Manatee County, Florida

Sheriff



RECEIVED

APR 06 2011

HUMAN RESOURCES

TO: Deputy April Dugan
THRU Captain Ron Couch
Lieutenant Barry Overstreet
FROM: Lieutenant Robert Mealy
DATE: April 6, 2011
SUBJECT: Letter of Appreciation

You conducted an investigation of a Vehicle Burglary, case # [REDACTED]
During your investigation you identified and lifted latent prints from the crime scene.

Because of your determination and extra effort, a person of interest has been developed in this case. For this you have the gratitude of the entire Criminal Investigation Division.

Please accept my personal thanks for a Job Well Done.

CC: Human Resources



W. BRAD STEUBE
Manatee County, Florida

Sheriff



TO: Deputy Amy Dunkum
THRU Captain Dan Kaufman
Lieutenant Dale Couch
FROM: Lieutenant Robert Mealy
DATE: April 21, 2011
SUBJECT: Letter of Appreciation

RECEIVED

APR 22 2011

HUMAN RESOURCES

You conducted an investigation of a Residential Burglary, case # [REDACTED]
During your investigation you identified and lifted latent prints from the crime scene.

Because of your determination and extra effort, a person of interest has been developed in this case. For this you have the gratitude of the entire Criminal Investigation Division.

Please accept my personal thanks for a Job Well Done.

CC: Human Resources

MANATEE COUNTY SHERIFF'S OFFICE
M E M O R A N D A

TO: Deputy April Dugan

THRU: Captain Waiters
Lieutenant J. Perry

FROM: Major Dennis Dummer *DD*

DATE: September 6, 2013

SUBJECT: Appreciation

We received a [REDACTED] who wished to express her appreciation for your assistance in filing a report. She stated you were kind, patient and understanding while taking a report.

Please accept my sincere appreciation for your dedication to duty and commitment to our community. You not only reflect a positive image upon yourself but our agency.

DPD/yfg

cc: Personnel

RECEIVED

SEP 09 2013

MCSO Human Resources

9-2-13

Min Shingledecker

Min Dunner

Re Case: [REDACTED]

Shuff:

I would like to compliment two of your staff who did a great job helping me with a bad situation.

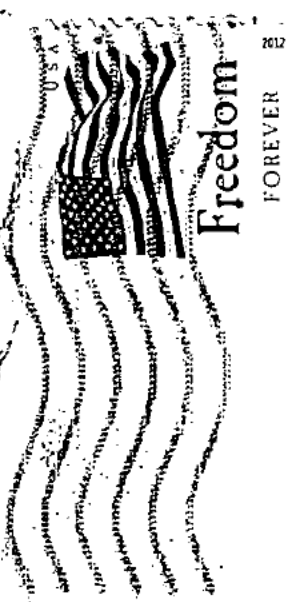
^{Dist #3}
Deputy April Dugan was very kind, patient & understanding while taking my report for Thief.

^{JO}
Detective John Russell was also very kind, knowledgeable & professional & did an unbelievable job at finding my jewelry at a pawn shop.

Kindly extend my sincere gratitude to these two staff members and a special thanks to the entire department.

Thank You,

9/5/13: letter of acknowledgment sent to Ms. [REDACTED]

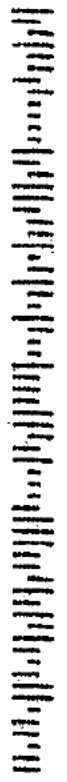


FOREVER

TAMPA, FL 335
SAINT PETERSBURG FL
03 SEP 2013 PM 71

W. Brad Steuber, Sheriff's Office
Manatee County Sheriff's Office
600 301 Blvd, Wash
Bradenton, Florida 34205

RECEIVED
2013 SEP 4 PM 12 08
SHERIFF
MANATEE COUNTY
FLORIDA



MANATEE COUNTY SHERIFF'S OFFICE
M E M O R A N D A

TO: Deputy April Dugan

THRU: Captain R. Couch
Lieutenant J. Perry
Sergeant J. Andersen

FROM: Major Dennis Dummer *DD*

DATE: January 30, 2013

SUBJECT: Appreciation

We received an e-mail from [REDACTED] who wished to express his appreciation for your assistance when his home was burglarized. He stated you were caring and professional.

Please accept my sincere appreciation for your dedication to duty and commitment to the community. Your actions are not only a positive reflection upon yourself, but the agency.

DPD/yfg

cc: Personnel

RECEIVED

JAN 31 2013

MCSO Human Resources

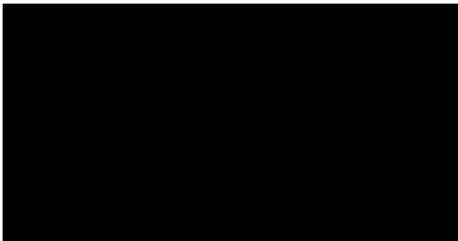
Gard, Yvonne

From: [REDACTED]
Sent: Wednesday, January 30, 2013 7:45 AM
To: Gard, Yvonne
Subject: case [REDACTED]

Dear Sherriff W. Brad Steube,

On 1/28/13 my family and I were victims to an armed burglary case [REDACTED]. Deputy Hasty and a female deputy responded to the scene. I want to thank them for their caring and professional way they treated me and my family. Deputy Hasty took his time and explained to me what had happened and what we needed to do next. The female deputy who I do not remember her name stayed with my two young children while Deputy Hasty walked with me in my house to excess the damage.

As a fellow law enforcement officer I know how stressful their jobs can be. I wanted to let you know that I appreciated the time they took and the caring nature they displayed.



April Dugan

Manatee County Sheriff's Office
Administrative Compliant # AC-2004-042

To: Chief Inspector Ed Judy *wpj*
Professional Standards

Thru: Major Connie Shingledecker

From: Captain William G. Dixon *[Signature]*

Date: May 08, 2004

Allegation: Neglect of Duty

The complainant alleges that the Detective April Dugan failed to properly secure her duty weapon in the issued holster while performing the duties of a Mounted Patrol Deputy. Violation of G.O. 1.013, Section 2.11.3, Failure to perform duties for which an employee is compensated.

On Sunday, April 11, 2004 at approximately 1515 hours, Detective Dugan's horse had broken loose from the MCSO Mounted Patrol Trailer parked on the east side of Gulf Drive (Bradenton Beach) in the Command Post area and ran away. Detective Dugan and other deputies present gave chase on foot. During this time Deputy Carol Magnusson walked over to her patrol car and found a handgun lying in the sand next to the car. Believing that the gun belonged to a deputy working the detail, Deputy Magnusson secured it in the trunk of her patrol car and notified Lt. Sanchez. After the horse was caught and taken back to the trailer, Lt. Sanchez notified me that Detective Dugan had lost her handgun and it had been returned to her. I then spoke to Detective Dugan about the issue and she stated that she did not know that it had fallen out of her holster and did not know how it had happened. I asked Dugan if her holster had been snapped and she stated yes. I asked if both snaps had been fastened and she stated that she does not snap the second lower snap on the holster. I then took hold of her handgun by the grip and attempted to remove or pull it out of the holster with only the top snap fastened and was unable. I inquired no further into this incident due to the need for Detective Dugan to care for her horse. It should be noted that the Command Post was next to a covered picnic area, which was occupied by numerous adults and children playing and socializing in the immediate area.

Complainant: Captain William Dixon
Manatee County Sheriff's Office

515 11th Street West
Bradenton, FL 34205

Alleged Deputy: Detective April Dugan
Date of Incident: April 11th, 2004
Date Reported: April 12th, 2004
Date issued to Lt. Dixon: April 20th, 2004
Date of Finding: May 17, 2004
Findings: 1). Sustained

The following taped interviews were conducted:

Detective April Dugan, Friday, April 30th, 2004

April 30th, 2004 at 1006 hours:

On the above date and time I met with Detective April Dugan in my office, which was located in the Criminal Investigation Division at District Six, where I conducted a taped interview. Dugan swore and signed that her statements were true. Dugan was given the opportunity to read the complaint of misconduct and asked to read and sign an admonition form, which she did. Dugan advised she understood the admonition form and allegations of misconduct. Details of interview are as follows:

I explained that an allegation of misconduct was filed against her by myself, which alleges that her gun fell out of the holster at the beach; it wasn't properly secured in her holster. I asked Dugan if she recalled this incident and she stated, "Yes". I asked her to tell me in her own words what had happened. She stated the following:

As you already know, you were there. It was a very hectic day, my first day on Mounted Patrol, and my first detail. My horse was agitated, we had been riding around all day and I don't know what happened with my holster. But we riding around quite a bit that day and she was jerking around quite a bit that day so I don't know if it got knocked lose or what. I won't ever be able to say but hum. She was tied to the trailer at one point. I was done riding and I noticed she was trying to break free from the trailer and actually Deputy Magnusson and Chris Rivett asked to see my horse. We were talking about my horse and it looked like she was more calmed down. I thought it might be time to go back over there and get her out and ride her in circles like some of the team members had said. They wanted to see her so I was going to show them to her. Caroline and Rivett came

over there with me. I opened up the trailer and went in there and took off her breast collar. I got it and she was still secured with the necktie in the trailer. I got out and went and out that in the dressing room there on the trailer. The next thing I knew I saw her taking off across the beach. So, I went to chase after her and thought that (her was your horse, yes). So I started taking off after her and as I was running by a patrol car which I assume was Magnusson, I thought that my cell phone had fell which I was going to find later. Cause I was just on it trying to get a hold of you and ah maybe I didn't out it in right or whatever. It had fallen off a couple times earlier jerking around on the horse anyway. So I was like whatever I'll get that thing later. Never entering my mind that it could have been my gun. It didn't feel heavy enough, I wasn't even sure if something fell or not. So anyway, so I'm going across the beach and finally get the horse and walk back. Magnusson points down at my belt and my guns gone. So anyway, she says don't worry I have it. I said thank God and she had it giving it back to me. Lt Sanchez told her (Magnusson) to give it back to me. I immediately told you about it and I'm pretty sure what you wrote was right. I wondered how it came out because I knew that the top snap was snapped. I just don't understand how, unless when I was running I was jerking on it or when I was getting on or off the horse I was jerking on it. I never in seven years snapped the bottom snap, which low and behold is a violation of General Orders according to Inspector Lavender. It will be snapped for now on.

I advised Dugan that I had a few questions to reiterate a couple of things.

I reminded her that out at the beach we spoke briefly about the incident. While we were talking during our conversation you stated that you did not know how your gun had fallen out of your holster and you did not know how it had happened. You also stated that your holster was snapped using the top snap only.

I asked Dugan if she actually knew when her gun fell out of the holster while you were working at the beach or are assuming based on what you felt that something fell of your belt while you were running after your horse. Dugan stated that she was assuming and not until everything was over did she put it together.

I asked Dugan if the gun could have come lose somehow while she was messing with her horse's saddle or could the stirrup got caught on the gun causing it to come ajar? Dugan stated she thinks so, because right before it happened she was in the trailer with her horse and she was bumping all around like a mare in heat.

I repeated to Dugan that she stated earlier that she felt something fall off her belt but wasn't sure it was her gun but thought it was her phone. Dugan stated Yes, and it just so happened she remembered that she ran past a patrol car in the circle she was in.

I asked Dugan if she thought there was any possibility that her holster became unsnapped while she was dealing with her horse? Dugan stated it must have been.

I confirmed that the horse was acting up and bumping around. Dugan stated that the horse was nuts and that she has never seen her act like that before.

I confirmed that Dugan stated that she does not use the lower snap on her holster and why she did not use the snap, which was designed as a safety feature to retain it? Dugan stated that for the record, she will for now on. Dugan stated that she just did not like it, a third thing. Dugan stated that she has practiced using the one and that three steps make her nervous.

I confirmed that Carol Magnusson found the gun and returned it to Dugan. I asked Dugan if the gun was in tact, ammunition accounted for and the magazine in it. Dugan stated, "Yes".

I asked Dugan if there was anything that she would like to add that was not discussed and she stated no.

Interview concluded at 1016 hours.

I had Inspector Lavender conduct a check of the holster issued to Dugan for any defects to which he found none. I received a memo from Inspector Lavender also.

I received narrative reports from Lt. Sanchez and Deputy Carol Magnusson in reference to this incident and deemed that an interview would not be needed.

Conclusion:

The investigative findings for these allegations are as follows:

1. I am able to sustain the allegation. There is evidence to show that Detective Dugan failed to properly secure her duty weapon in the issued holster using both security snaps as required.

It is recommended that Detective Dugan receive disciplinary action in the form of a Letter of Reprimand for failing to properly secure her duty weapon in the issued holster while on duty. This recommendation is made with the understanding that Professional Standards will review this recommendation to ensure consistency in like and similar findings.

A copy of the appropriate paper work and the tape are enclosed with this case file. The tape has not been transcribed.

WGD/wgd



MANATEE COUNTY SHERIFF'S OFFICE
ALLEGATION OF EMPLOYEE MISCONDUCT

AC04-115



COMPLAINANT

NAME Paula Newman

DATE OF BIRTH [REDACTED]

ADDRESS [REDACTED]

HOME PHONE [REDACTED]

OFFICE PHONE [REDACTED]

EMPLOYEE

NAME April Dugan

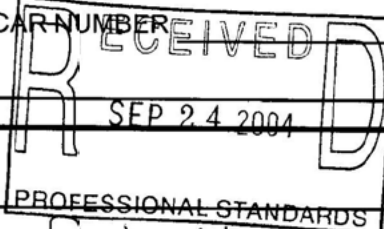
ASSIGNMENT Detective

SEX F

RACE W

BADGE/ID/CAR NUMBER [REDACTED]

OTHER DESCRIPTION [REDACTED]



Details of the incident. (Use additional sheets, if necessary)

On September 23, 2004 I, Dep. Paula Newman, was working ~~at~~ my post at Juvenile Security in the courthouse. Dep. Marc Newman was in Juvenile court reference a trial. I went to lunch at 12:00 p.m. and when I returned at 12:30 p.m. Detective April Dugan was sitting in the waiting area of Juvenile Court with Detective Marc Newman. Both of them saw me when I walked into the Bailiff's area, ~~and~~ when I went to walk to the security area at 12:55 both of them watched me and were saying something and laughing.

Detective Dugan had no reason to be in Juvenile Court and both her and Detective Marc Newman had been warned by Capt. Ministre / about their involvement at the work place. I feel that April was only there trying to intimidate me. At that point I called Sgt. Janney and advised him of the situation and he relieved me.

I have read and understand this complaint and find it true and correct. It is my desire that this complaint be diligently investigated. I further understand that if the investigation proves these allegations to be false, I may be liable to both civil and criminal prosecution.

9/23/04
Date

Paula L Newman
Signature Of Complainant (Parent Or Guardian signature if complaint is a minor)

Nancy L Schoff
Printed Name Of Receiving Employee

Nancy L Schoff
Signature Of Receiving Employee

DISTRIBUTION

COPY TO THE AFFECTED BUREAU CHIEF

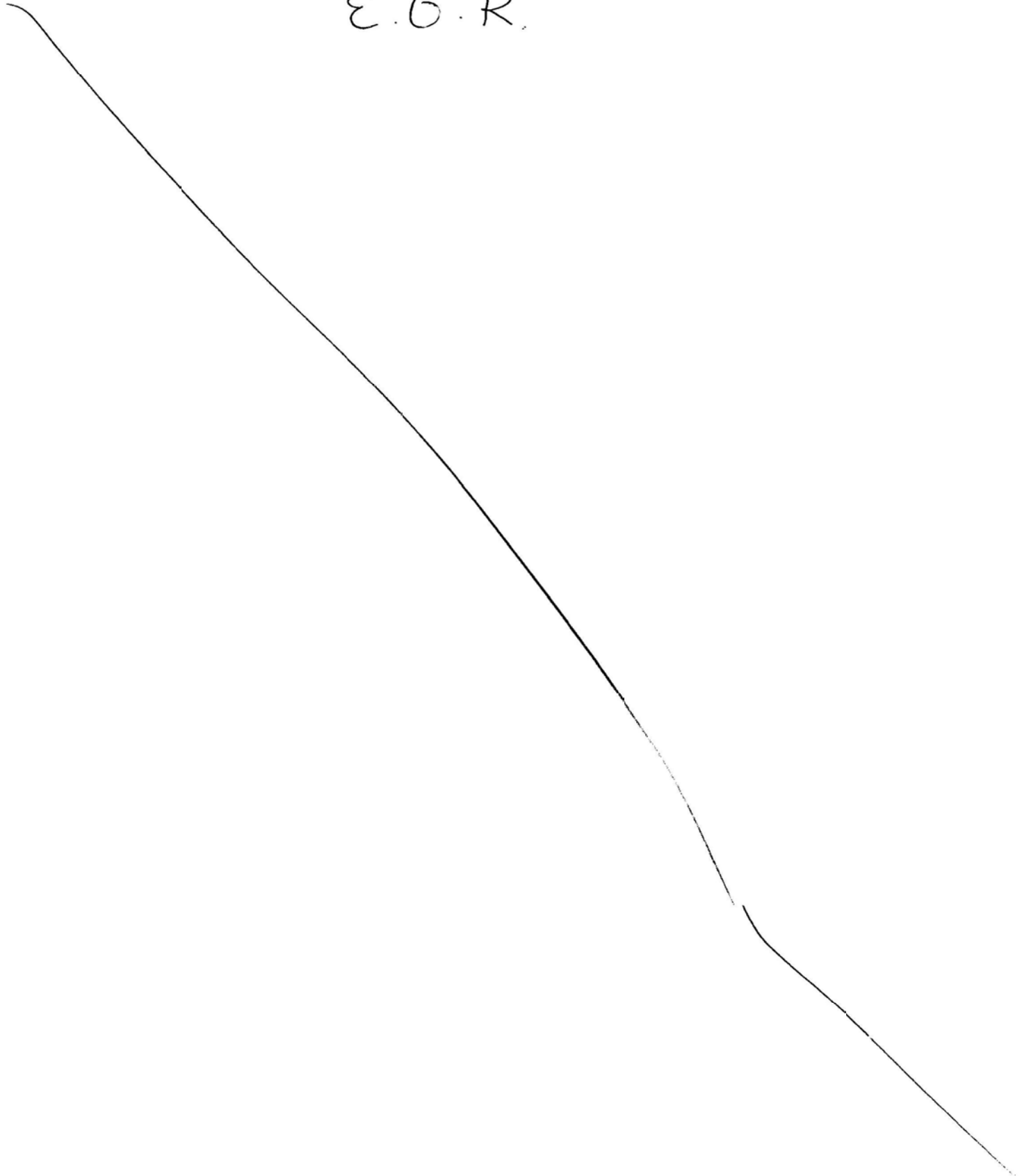
ORIGINAL TO PROFESSIONAL STANDARDS

COPY TO THE COMPLAINANT

COPY TO THE SHERIFF/ CHIEF DEPUTY

at my post and advised me to go upstairs
until they leave. I then contacted Lt. Vitioli
which is Det. Dugan's supervisor and advised
him of the situation.

E.G.R.





MANATEE COUNTY SHERIFF'S OFFICE
ALLEGATION OF EMPLOYEE MISCONDUCT

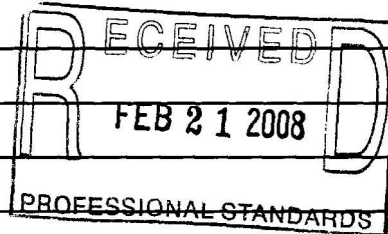
AC 2008-029



COMPLAINANT	NAME <u>Stephen Dahl</u>	DATE OF BIRTH <u>3/21/45</u>
	ADDRESS <u>6505 US Hwy 301 N DIS Ellenton FL</u>	
	HOME PHONE <u>722 0760</u>	OFFICE PHONE _____
EMPLOYEE	NAME <u>Officer DUGAN</u>	ASSIGNMENT <u>Constable?</u>
	SEX <u>F</u> RACE <u>W</u>	BADGE/ID/CAR NUMBER <u>Did not record</u>
	OTHER DESCRIPTION <u>Heavy-set, ruddy face, brown hair</u>	

Details of the incident. (Use additional sheets, if necessary)

See attached



I have read and understand this complaint and find it true and correct. It is my desire that this complaint be diligently investigated. I further understand that if the investigation proves these allegations to be false, I may be liable to both civil and criminal prosecution.

2-21-08

Date

[Signature]

Signature Of Complainant (Parent Or Guardian signature if complaint is a minor)

Micah Mathews

Printed Name Of Receiving Employee

[Signature]

Signature Of Receiving Employee

DISTRIBUTION

COPY TO THE AFFECTED BUREAU CHIEF

ORIGINAL TO PROFESSIONAL STANDARDS

COPY TO THE COMPLAINANT

COPY TO THE SHERIFF/ CHIEF DEPUTY



CONTINUATION



PCA ☐ CAPIAS ☐ JUV REF ☐ SUPPLEMENT ☐

Case #

RE: OFFICER DUGAN JANUARY 15TH

COMPLAINT



I phoned dispatch about 8:00 AM to complain that

1. A longtime friend had come to visit, but would not leave. I described this person to dispatch as a Philadelphia lawyer who had, it turned out, become totally alcoholic.
2. That this friend was scheduled to enter Bay Pines Hospital for treatment, but was staying with me until he was admitted.
3. That there had been no violence, but that "he had to go."

During the time before the cruiser arrived, I attempted to tell one GEORGE D. BILLOCK, JR that he had to pack his bags and must leave. He had been told this by me on the Sunday, January 13th, but kept arguing that he would soon comply with the hospital paperwork which he had neglected. I can only say, "try to argue with a brilliant lawyer who is addicted to booze."

However, when Ms. Dugan, a heavy-set woman with a ferocious gleam in her eye, approached my home, Unit D15 in Palmgrove Mobile Home Park, 6505 US Hwy 301N, Ellenton, she affected an aggressive attitude. I had given the name of Mr. Billock to dispatch and could hear on the radio something about him, as Ms. Dugan approached the door. She asked if there had been any violence or fighting. I explained I had asked my guest to leave for several days, and that he refused to, and that there had been no violence. Mr. Billock came to the door and said the police would not be necessary, but despite our gentlemanly demeanor, Ms. Dugan looked me eye-to-eye, as if she were challenging me to a duel, and said, "YOU GET YOUR ASS INSIDE AND YOU PACK HIS BAG." I tried to explain that I didn't know what went in and Ms. Dugan said, with her same tough-guy attitude, "SEEK AND YE SHALL FIND," as if she were addressing a moron. Then she said, contemptuously, "CAN'T YOU BOYS SOLVE YOUR OWN PROBLEMS?"

Mr. Billock made his excuses, and I simply took his bag, and pile of belongings out to the driveway and laid them there, and Mr. Billock packed the bag, as I was ordered back into my house. Dispatch had said that I would have to charge him with trespassing, so that he could not return, which I agreed

ADMINISTRATIVE	Sworn to and subscribed before me this <u>21</u> day of <u>February</u> , 20 <u>08</u>  Notary Public, Deputy Sheriff, State of Florida		Affiant X  Affiant (Print)			
	Related Report Number(s)					
	Deputy Reporting		I.D. Number			
	Supervisor Reviewing		I.D. Number	Referred To	Assigned To	By

RECEIVED
FEB 21 2008
PROFESSIONAL STANDARDS



CONTINUATION

PCA ☐CAPIAS ☐JUV REF ☐SUPPLEMENT ☐

Case #

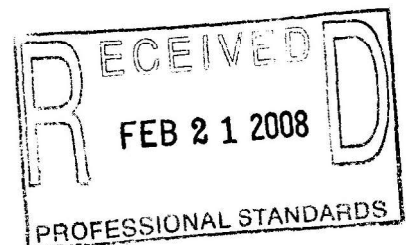
to. In about ten minutes, Mr. Billock packed his bags and left them on my driveway, then went to McDonald's for a coffee, of which he did not inform me. (I later received a call from him and took him to the VA Center on Hwy 301, Ellenton). I tried to be courteous and thank Ms. Dugan, despite her rudeness, and another cruiser came up with an officer KAVARNA (?), a man who stood by the open door of his cruiser. Ms. Dugan explained in her overbearing way that if Mr. Billock were readmitted, this would invalidate the trespass complaint and "DON'T CALL US TO HELP IF YOU DO THAT." She then indicated she thought we were two homosexuals having a fight, to which I answered, "No I have been married twice and like what you ladies have." Any attempt to be friendly with Officer Dugan is pointless.

Although superficially efficient, if this police officer is a public servant and an educated professional, then I am Mahatma Gandhi. Her attitude from the first was overbearing and rude, and, at the very least, confrontational. Mr. Billock and I were classmates at Yale, and Mr. Billock was a highly-rated Washington DC lawyer before his personal decline. His very dress indicated as much. I was dressed in Bermuda shorts and a T-Shirt.

I have waited a month to let the rancor of meeting Ms. Dugan wear off. I mentioned this conduct to other police officers and was told, "You ought to report her." I am doing this for the reasons above, but also, if Ms. Dugan confronts, let's say, some hardened criminal she is likely to get her head blown off, she is that much "in your face."

Submitted,

Stephen R. Dahl



ADMINISTRATIVE	Sworn to and subscribed before me this <u>21</u> day of <u>February</u> , 2008		Affiant <u>X</u> <u>SR Dahl</u>			
	<u>[Signature]</u> Notary Public, Deputy Sheriff, State of Florida		Affiant (Print)			
	Related Report Number(s)					
	Deputy Reporting		I.D. Number	Unit		
Supervisor Reviewing		I.D. Number	Referred To	Assigned To	By	Date

Manatee County Sheriff's Office

TO: CHIEF INSPECTOR ED JUDY *edj 4/07/08*

THRU: SHERIFF STEUBE *was [unclear] 4/14/08*
COLONEL HAGAMAN
MAJOR DUMMER *DPD 4/14/08*
CAPTAIN KAUFMAN *[signature]*

FROM: LIEUTENANT WILLIAM EVERS

DATE: March 25, 2008

SUBJECT: SUMMARY AND CONCLUSION OF
ADMINISTRATIVE COMPLAINT
INVESTIGATION A.C. #2008-029

ACCUSED: DEPUTY APRIL DUGAN

COMPLAINANT: STEPHEN DAHL

INVESTIGATOR: LIEUTENANT WILLIAM EVERS

INITIATED ON: MARCH 14, 2008

COMPLETED ON: MARCH 25, 2008

ALLEGATIONS: CONDUCT UNBECOMING A DEPUTY
1013, 2.11.1.14

FINDING: NOT SUSTAINED

A.C. #2008-029

SYNOPSIS

On January 15, Dep. Dugan was dispatched to a trespassing incident at the complainant's residence. The complainant, Stephen Dahl had a longtime college friend staying with him. The friend was supposed to stay until he was admitted to Bay Pines Hospital for alcohol abuse treatment. However, the friend neglected to fill out the hospital paperwork, so the complainant asked him to leave. The dispatch "Event Chronology" indicates that the friend had stayed for two weeks and that the mobile home park rules only allow visitors to stay for two weeks. According to the complaint, Dep. Dugan arrived and had an aggressive attitude. During their conversation, she told the complainant, "You get your ass inside and you pack his bag." Additionally, she stated "Can't you boys solve your own problems?" The complainant states that Dugan indicated that he and his friend were homosexuals. The complainant describes Dugan as overbearing, rude and confrontational.

INVESTIGATION

I reviewed this complaint and obtained a copy of the dispatch event chronology. I interviewed Dep. Karava on March 16th. I interviewed Dep. Dugan on March 20th.

INTERVIEWS

Deputy Karava

On March 16, 2008 Deputy Karava responded to District 2 to provide a formal witness statement. Prior to the interview, Deputy Karava was provided with copies of the Manatee County Sheriff's Office Admonition and Order of Confidentiality forms. Deputy Karava acknowledged his comprehension of both forms by signature.

The following is a synopsis of that interview:

Dep. Karava stated that when he arrived it was apparent that the investigation was completed and that a decision had been reached for the male guest to leave. He therefore remained by his car. Karava states that neither of the males raised their voices or was verbally abusive. Karava states that Dep. Dugan appeared aggravated by the situation. Karava states that he does not know the circumstances of what happened prior to his arrival that caused her aggravation. Eventually, the male left and Dugan spoke briefly with Karava at the rear of his patrol car about this incident. The complainant approached and stated something to the effect that he was not homosexual. Karava is not certain why the complainant made that statement.

Additionally, he is not certain of the statements that the complainant attributes to Dugan. He states that he remained at his car and due to the distance did not hear the conversation clearly. Regarding the statement, "You get your ass inside and pack his bag." Karava believes that profanity was used, but is not certain of whether it was Dugan speaking with him about the incident after the fact or whether Dugan made that statement to the complainant. Regarding the statement, "Can't you boys solve your own problems?" Karava recalls something to that effect.

Dep. Dugan

On March 20, 2008, Dep. Dugan responded to District 2 to provide a formal statement. Prior to the interview, Dep. Dugan was provided with copies of the Manatee County Sheriff's Office Admonition and Order of Confidentiality forms. Dep. Dugan acknowledged her comprehension of both forms by signature. Dep. Dugan then reviewed Dep. Karava's taped interview.

The following is a synopsis of that interview:

Dep. Dugan stated that she was dispatched to the residence where she spoke with Mr. Dahl. He told Dep. Dugan that he requested that his friend leave, but that his friend refused. Dep. Dugan then spoke with the friend who immediately agreed to leave. Dep. Dugan then asked the complainant if he wanted a trespass warning issued, but the complainant declined. The friend then began to collect his belongings, however, there was some disagreement over his belongings and the packing process proceeded very slowly. According to Dugan, it was obvious that

the friend was stalling. Dep. Dugan eventually asked the friend "Are you leaving or not? The friend replied that he was going and Dugan then stated "O.K. if you are going to leave, then you need to go and you need to move it... so that we are not out here all day." Dugan states that Dahl went into his home and she asked Dahl if there was anything else in the house that belonged to the friend and if there was he needed to pack it up and get it out so that the friend could leave. Dugan states that she did not order him in the house and did not tell him to get his ass in the house. Dugan states that she was not rude, but acknowledges that she was aggravated. She stated that the source of her aggravation was that the friend found numerous reasons to stay. The friend eventually departed, but left his belongings in the driveway. Dahl thanked Dugan for her assistance and assured her that he was not gay. She reiterates that she did not use profanity with Dahl or his friend, but probably used profanity when speaking with Dep. Karava at his car. Dep. Dugan states that she did not make the statement "Can't you boys solve your own problems."

CONCLUSION

Upon careful review of written documentation contained within this investigation, and a review of the General Orders, Policies and Procedures of the Manatee County Sheriff's Office, I submit a **NOT SUSTAINED** finding to the allegation of Conduct Unbecoming an Employee. This finding is under the violation of the Manatee County Sheriff's Office General Order 1013, 2.11.1.14., which states:

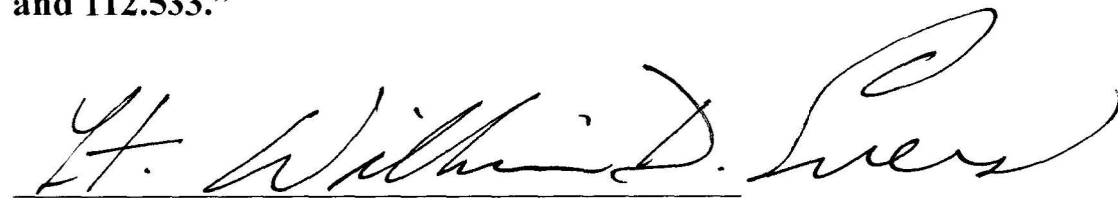
**Using rude or insulting language offensive to the public while on duty.
(Violation subject to 5 days suspension to Termination).**

In conclusion, the complainant and Dep. Dugan acknowledge that the incident was resolved by Mr. Billock volunteering to leave the residence. Dep. Dugan admits that she became aggravated by what she perceived as Mr. Billock's stalling tactics. The written complaint also provides indicators that Mr. Billock did not expedite his departure. Dugan denies that she was rude or used profanity when speaking with the complainant or his friend, Mr. Billock. Dep. Karava is not certain of the statements that were made. Therefore, there is insufficient corroborative evidence that Dep. Dugan used rude or insulting language to the complainant.

Thus barring the introduction of any new evidence or testimony, this investigation will be closed to reflect a **NOT-SUSTAINED**.

Pursuant to Florida State Statute 92.525:

“I, the undersigned, do hereby swear, under penalty of perjury, that, to the best of my personal knowledge, information, and belief, I have not knowingly or willfully deprived, or allowed another to deprive, the subject of the investigation of any of the rights contained in Florida State Statutes 112.532 and 112.533.”

A handwritten signature in cursive script, reading "H. William D. Lewis". The signature is written in black ink and is positioned above a horizontal line.

Lieutenant



MANATEE COUNTY SHERIFF'S OFFICE



INVESTIGATIVE REPORT ON DEPUTY MISCONDUCT

NAME OF DEPUTY COMPLAINED AGAINST DETECTIVE APRIL DUGANALLEGATION CONDUCT UNBECOMING A DEPUTY/INSUBORDINATION/DISOBEDIENCEDATE & TIME REPORTED SEPTEMBER 23, 2004RECEIVED BY (Employee's Name & ID #) NANCY SCHOFF

HOW RECEIVED

Phone ☐In Person ☐

Other (Specify) _____

DATE & TIME OCCURRED SEPTEMBER 23, 2004LOCATION OF INCIDENT MANATEE COUNTY COURTHOUSE JUVENILE WAITING ROOMNAME OF REPORTING PARTY DEPUTY PAULA NEWMANADDRESS 515 W 11th street west Bradenton, FLDATE OF BIRTH [REDACTED] HOME PHONE N/A BUSINESS PHONE 2250

SYNOPSIS OF ALLEGATION

ON SEPTEMBER 23, 2004, DETECTIVE DUGAN WENT TO THE ABOVE LOCATION TO MEET DETECTIVE NEWMAN. DEPUTY NEWMAN WAS WORKING THAT POST AND FEELS THAT DETECTIVE DUGAN WAS ONLY THERE TO INTIMIDATE HER. DEPUTY NEWMAN ALSO STATED IN HER COMPLAINT THAT DETECTIVES DUGAN AND NEWMAN HAD BEEN WARNED ABOUT INVOLVEMENT IN THE WORKPLACE. THERE WILL BE A NOT-SUSTAINED FINDING FOR CONDUCT UNBECOMING. THERE WILL BE A SUSTAINED FINDING FOR DETECTIVE DUGAN ON INSUBORDINATION/DISOBEDIENCE. BASED ON PREVIOUS DISCIPLINE IT IS RECOMMENDED THAT DETECTIVE DUGAN BE GIVEN AN 8.6 HOUR SUSPENSION.

FINDINGS IF THIS IS THE ONLY OR FINAL REPORT

Sustained ☒Not Sustained ☐Unfounded ☐Exonerated ☐10/11/04
Date of determination of findings[Signature]
Investigating Supervisor

DISTRIBUTION

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Original to Professional Standards

Copy to Bureau Commissioner

Copy to Sheriff/Chief Deputy

WHEN PREPARED BY ANY SUPERVISOR


Copy to Supervisor

Original to Professional Standards

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Detective April Dugan
Investigative Bureau/CID

FROM: Major C.K. Shingledecker 
Investigative Bureau Chief

DATE: November 18, 2004

SUBJECT: Results of Hearing to Show Cause
AC #2004-115

On November 15, 2004, you were afforded the opportunity to Show Cause why the proposed disciplinary action of a Letter of Reprimand should not take place regarding a sustained violation of General Order 1013, 2.11.2.1, Insubordination/Disobedience to Orders.

Upon review of the evidence and testimony presented in this hearing, I have reached the following decision. I have elected to change the Sustained finding for General Order 1013, 2.11.2.1, under Insubordination/Disobedience to Orders to Not Sustained.


As a result of this finding, no disciplinary action will be implemented.

Cc: Captain Kaufman
Lieutenant Vitaioli
Personnel
Professional Standards

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D U M

TO: Detective April Dugan
Investigative Bureau/CID

FROM: Major C. K. Shingledecker 
Investigative Bureau Chief

DATE: October 25, 2004

SUBJECT: Proposed Disciplinary Action – DA #1525
AC #2004-115

Allegations of Insubordination/Disobedience to Orders by violation of General Order 1013, 2.11.2.1, have been sustained against you. For details of these allegations, refer to the Allegation of Employee Misconduct Form attached hereto.

It is proposed that the following disciplinary action take place; that you receive a Letter of Reprimand. This action, if taken, will be made a permanent part of your personnel file.

I have scheduled an appointment for you on November 15, 2004, at 9:00 A.M. in the Professional Standards office (Room 13) at the Stockade at 14490 Harlee Road, Palmetto, Florida (Pat Glass Blvd. - First Building on left). At that time you will be afforded the opportunity to show cause why the proposed disciplinary action should not take place. (See attached Hearing Procedures)

If you elect to do so, you may bring your attorney(s) or any witnesses you desire to testify on your behalf.

If you are in agreement with the proposed disciplinary action, please sign and return the attached waiver to Professional Standards at the Stockade.

CKS/bs
Attachment

**MANATEE COUNTY SHERIFF'S OFFICE
WAIVER AND RELEASE**

STATE OF FLORIDA

October 25, 2004

Date

COUNTY OF MANATEE

I, **Detective April Dugan**, being fully aware of my rights, do hereby state as follows:

1. That I have been accused of violating Manatee County Sheriff's Office Policies and Procedures, to wit: **General Order 1013, paragraph 2.11.2.1, Insubordination/Disobedience to Orders** and was so notified by memorandum dated October 25, 2004.
2. That the proposed disciplinary action for the above violation is:

Letter of Reprimand

3. That I am aware that I have the right to attend a show cause hearing and present reasons why the proposed discipline should not be imposed.
4. That I am aware that I have the further right to appeal any decision reached at the show-cause hearing, either to the Sheriff or the Sheriff's Career Service Appeal Board, depending on the discipline imposed.
5. Being fully apprised of and aware of the appeal rights mentioned above, and being fully informed thereon, I hereby knowingly and voluntarily accept the proposed disciplinary action in Paragraph 2, above, and further knowingly and voluntarily waive any right to attend the show-cause hearing and my right to appeal to the Sheriff or Career Service Appeal Board.

By my signature below, I hereby acknowledge that I have read and understand this Waiver. I further acknowledge that I have the right to consult with an attorney or other individual of my choosing prior to signing this Waiver and state that I either have so consulted or hereby knowingly decline to do so.

Witness Signature

Signature of Deputy

Date:



MANATEE COUNTY SHERIFF'S OFFICE
ALLEGATION OF EMPLOYEE MISCONDUCT

AC 2005-031



COMPLAINANT

NAME Lieutenant Keith Keough DATE OF BIRTH _____
ADDRESS MCSO/CID
HOME PHONE _____ OFFICE PHONE X2515

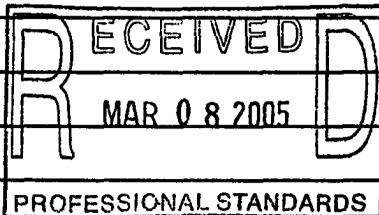
EMPLOYEE

NAME April Dugan ASSIGNMENT CID/Property Crimes
SEX F RACE W BADGE/ID/CAR NUMBER 10000486
OTHER DESCRIPTION _____

Details of the incident. (Use additional sheets, if necessary)

On March 2, 2005 I was assigned as the on call CID supervisor. On the stated date, at approximately 0130 I received a telephone call from patrol supervisor, Sergeant Dale Couch. Couch advised that his deputies were working a number of burglaries and that they were currently holding three suspects. During the course of this conversation it was determined that there was investigative follow needed to conduct suspect interviews and arrange to recover stolen property.

I made telephone contact with Detective Dugan and after explaining the situation to her, instructed her to respond and conduct an investigation. I learned the next morning that Detective Dugan did not respond as she was instructed, she merely contacted the patrol supervisor and based upon that call decided not to respond.



I have read and understand this complaint and find it true and correct. It is my desire that this complaint be diligently investigated. I further understand that if the investigation proves these allegations to be false, I may be liable to both civil and criminal prosecution.

3-3-05

Date

Le. Keith Keough

Signature Of Complainant (Parent Or Guardian signature if complaint is a minor)

Printed Name Of Receiving Employee

Signature Of Receiving Employee

DISTRIBUTION

COPY TO THE AFFECTED BUREAU CHIEF
ORIGINAL TO PROFESSIONAL STANDARDS

COPY TO THE COMPLAINANT
COPY TO THE SHERIFF/ CHIEF DEPUTY



MANATEE COUNTY SHERIFF'S OFFICE
ALLEGATION OF EMPLOYEE MISCONDUCT

AC 2005-031

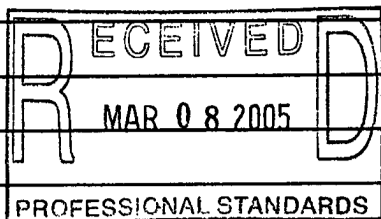


COMPLAINANT	NAME <u>Lieutenant Keith Keough</u>	DATE OF BIRTH _____	
	ADDRESS <u>MCSO/CID</u>		
	HOME PHONE _____	OFFICE PHONE <u>X2515</u>	
EMPLOYEE	NAME <u>April Dugan</u>	ASSIGNMENT <u>CID/Property Crimes</u>	
	SEX <u>F</u>	RACE <u>W</u>	BADGE/ID/CAR NUMBER <u>10000486</u>
	OTHER DESCRIPTION _____		

Details of the incident. (Use additional sheets, if necessary)

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3-3-05

Date

Lo. Keith Keough

Signature Of Complainant (Parent Or Guardian signature if complaint is a minor)

Printed Name Of Receiving Employee

Signature Of Receiving Employee

DISTRIBUTION


COPY TO THE AFFECTED BUREAU CHIEF
ORIGINAL TO PROFESSIONAL STANDARDS

COPY TO THE COMPLAINANT
COPY TO THE SHERIFF/ CHIEF DEPUTY

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Deputy April Dugan
Enforcement Bureau/D3

FROM: Colonel Pearson 
Chief Deputy

DATE: July 5, 2001

EFFECTIVE DATE: July 5, 2001

SUBJECT: Disciplinary Action #1030
AC #2001-091 "O"

On June 27, 2001, you were afforded the opportunity to show cause why the proposed disciplinary action of a Ten (10) day (86 hr) suspension without pay should not take place regarding the sustained allegations of Insubordination/Disobedience to Orders, General Order 1013, paragraph 2.11.2.4 and 1013, 2.11.2.1.

Upon review of the testimony presented in this hearing, I have reached the following decision: I have elected to impose a Letter of Reprimand.

Therefore, you are to consider this as a Letter of Reprimand for your actions regarding a violation of General Order 1013, paragraph 2.11.2.4 and 1013, 2.11.2.1, under Insubordination/Disobedience to Orders.

Be advised any future violations of a like offense will prompt stronger disciplinary action.

A copy of this notification will be made a permanent part of your personnel file.


WBS/bs

cc: Major Steube
Captain Hagaman
Lieutenant Dixon
Personnel
Professional Standards

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Deputy April Dugan
Enforcement Bureau/D3

FROM: Colonel Pearson 
Chief Deputy

DATE: May 30, 2001

SUBJECT: Proposed Disciplinary Action - DA#1030
AC #2001-091 "O"

Allegations of Insubordination/Disobedience to Orders by violation of General Order 1013, 2.11.2.1 and 1013, 2.11.2.4, have been sustained against you. For details of these allegations, refer to the Allegation of Employee Misconduct Form attached hereto.

It is proposed that the following disciplinary action take place; that you receive a Ten (10) day (86 hr) suspension without pay. This action, if taken, will be made a permanent part of your personnel file.

I have scheduled an appointment for you on June 27, 2001, at 10:00 A.M. in the Professional Standards office (Room 13) at the Stockade at 14490 Harlee Road, Palmetto, Florida (Pat Glass Blvd. - First Building on left). At that time you will be afforded the opportunity to show cause why the proposed disciplinary action should not take place.

If you elect to do so, you may bring your attorney(s) or any witnesses you desire to testify on your behalf.

If you are in agreement with the proposed disciplinary action, please sign and return the attached waiver to Professional Standards at the Stockade.

**KP/bs
Attachment**

CC. Professional Std.

**MANATEE COUNTY SHERIFF'S OFFICE
WAIVER AND RELEASE**

STATE OF FLORIDA

May 30, 2001

Date

COUNTY OF MANATEE

I, Deputy April Dugan, being fully aware of my rights, do hereby state as follows:

1. That I have been accused of violating Manatee County Sheriff's Office Policies and Procedures, to wit: **General Order 1013, paragraph 2.11.2.4 and 1013, 2.11.2.1, Insubordination/Disobedience to Orders** and was so notified by memorandum dated May 30, 2001.
2. That the proposed disciplinary action for the above violation is:

Ten (10) day (86 hr) suspension without pay
3. That I am aware that I have the right to attend a show cause hearing and present reasons why the proposed discipline should not be imposed.
4. That I am aware that I have the further right to appeal any decision reached at the show-cause hearing, either to the Sheriff or the Sheriff's Career Service Appeal Board, depending on the discipline imposed.
5. Being fully apprised of and aware of the appeal rights mentioned above, and being fully informed thereon, I hereby knowingly and voluntarily accept the proposed disciplinary action in Paragraph 2, above, and further knowingly and voluntarily waive any right to attend the show-cause hearing and my right to appeal to the Sheriff or Career Service Appeal Board.

By my signature below, I hereby acknowledge that I have read and understand this Waiver. I further acknowledge that I have the right to consult with an attorney or other individual of my choosing prior to signing this Waiver and state that I either have so consulted or hereby knowingly decline to do so.

Witness Signature

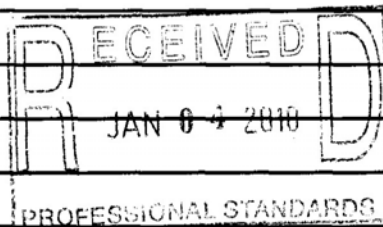
Signature of Deputy

Date:

**MANATEE COUNTY SHERIFF'S OFFICE
ALLEGATION OF EMPLOYEE MISCONDUCT**

Details of the incident. (Continued)

Ops. Center, she replied "for a while". I again asked how long, and she replied "a couple hours". I asked her what she was doing over there, and she said she was with Brandi. She also said that she stopped by the off duty office. She stated that she went to lunch with Brandi and some others, and then went back to CID with Brandi. I asked her if she had even left the Ops. Center when I had instructed her to, and she stated "no". When I asked why, she stated "because Patrol was there and Wischer was going". Several times during this questioning, she stated that she was wrong, and had no excuses. I explained to her that this behavior was unacceptable, especially since she has just recently completed her Performance Improvement Plan. The reason for her PIP was because of her lack of respect for authority, and higher case load and time management problems. During her PIP, I repeatedly modified case assignments to assist her in reducing the number of open cases she was carrying. This type of behavior is a key contributing factor in her lack of management abilities, and consistently high case loads. It also reflects a total disregard for supervision's attempts to work with her and help her improve.



MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D U M

TO: Detective April Dugan
Investigative Bureau/CID

FROM: Major C. Shingledecker *CKS (bs)*
Investigative Bureau Chief

DATE: April 12, 2005

SUBJECT: Proposed Disciplinary Action – DA #1583
AC #2005-031

Allegations of Neglect Insubordination/Disobedience to Orders by violation of General Order 1013, 2.11.2.4, have been sustained against you. For details of these allegations, refer to the Allegation of Employee Misconduct Form attached hereto.

It is proposed that the following disciplinary action take place; that you receive an 8.6 hour suspension without pay and will be Transferred to the Enforcement Bureau. This action, if taken, will be made a permanent part of your personnel file.

I have scheduled an appointment for you on April 27, 2005, at 9:00 A.M. in the Professional Standards office (Room 13) at the Stockade at 14490 Harlee Road, Palmetto, Florida (Pat Glass Blvd. - First Building on left). At that time you will be afforded the opportunity to show cause why the proposed disciplinary action should not take place. (See attached Hearing Procedures)

If you elect to do so, you may bring your attorney(s) or any witnesses you desire to testify on your behalf.

If you are in agreement with the proposed disciplinary action, please sign and return the attached waiver to Professional Standards at the Stockade.

**CKS/bs
Attachment**

**MANATEE COUNTY SHERIFF'S OFFICE
WAIVER AND RELEASE**

STATE OF FLORIDA

April 12, 2005

Date

COUNTY OF MANATEE

I, **Detective April Dugan**, being fully aware of my rights, do hereby state as follows:

1. That I have been accused of violating Manatee County Sheriff's Office Policies and Procedures, to wit: **General Order 1013, paragraph 2.11.2.4, Insubordination/Disobedience to Orders** and was so notified by memorandum dated April 12, 2005.

2. That the proposed disciplinary action for the above violation is:

**8.6 hour suspension without pay and will be
Transferred to the Enforcement Bureau**

3. That I am aware that I have the right to attend a show cause hearing and present reasons why the proposed discipline should not be imposed.

4. That I am aware that I have the further right to appeal any decision reached at the show-cause hearing, either to the Sheriff or the Sheriff's Career Service Appeal Board, depending on the discipline imposed.

5. Being fully apprised of and aware of the appeal rights mentioned above, and being fully informed thereon, I hereby knowingly and voluntarily accept the proposed disciplinary action in Paragraph 2, above, and further knowingly and voluntarily waive any right to attend the show-cause hearing and my right to appeal to the Sheriff or Career Service Appeal Board.

By my signature below, I hereby acknowledge that I have read and understand this Waiver. I further acknowledge that I have the right to consult with an attorney or other individual of my choosing prior to signing this Waiver and state that I either have so consulted or hereby knowingly decline to do so.

Witness Signature

Signature of Deputy

Date:

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Detective April Dugan
Investigative Bureau/CID

FROM: Sheriff Charles B. Wells *CBW*

DATE: May 23, 2005

SUBJECT: Results of Appeal

I have reviewed your appeal concerning the sustained allegation brought forth against you by Lieutenant William Vitaioli.

Upon review of the Hearing to Show Cause records and your synopsis of the event, I have elected to uphold the allegations as sustained. I will also uphold the disciplinary enacted by Major Shingledecker.

Therefore, the 8.6 hour suspension without pay and the transfer to the Enforcement Bureau will stand and remain as a permanent part of your personnel file.


CBW/bs

CC: Colonel Steube
Major Shingledecker
Major Hagaman
Captain Kaufman
Lieutenant Vitaioli
Personnel
Professional Standards

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Detective April Dugan
Enforcement Bureau

FROM: Major C. Shingledecker 
Investigative Bureau Chief

DATE: May 25, 2005

EFFECTIVE DATE: May 31, 2005

SUBJECT: Disciplinary Action #1583
AC #2005-031

On May 11, 2005, you were afforded the opportunity to show cause why the proposed disciplinary action of a 8.6 hour suspension without pay and a Transfer to Enforcement Bureau should not take place regarding the sustained allegations of Insubordination/Disobedience to Orders, General Order 1013, paragraph 2.11.2.4. Additionally, per your request, the investigation, Hearing to Show Cause recording and your written statement were reviewed by Sheriff Wells. It was his decision to uphold the original proposed disciplinary action.

Therefore, in accordance with General Order 1013, 2.8.4.1, which states: "All suspension shall begin on the first day of a pay period, i.e., every other appropriate Tuesday; and specify the number of hours for which the suspension is effective." Your 8.6 hour suspension will be taken on:

Tuesday	May 31, 2005	8:30 A.M. - 5:00 P.M.	<u>8.6 Hours</u>
			8.6 HOURS

Additionally, employees shall not work so as to subvert compensation loss during the pay period in which the suspension is in effect, e.g., take Annual Leave in lieu of suspended days, or work in a law enforcement related off-duty or second job. (G.O. 1013, 2.8.4.2)

Therefore, during the pay period of May 31, 2005 through June 13, 2005, you cannot work or be compensated for more than 77.4 hours without approval of your Bureau Chief or Professional Standards.

You will also consider this your Transfer to the Enforcement Bureau. You will report to Lieutenant Tony Carr, District 3 at 7:00 P.M., on June 14, 2005 for your assignment.

Be advised any future violations of a like offense will prompt stronger disciplinary action.

A copy of this notification will be made a permanent part of your personnel file. A copy of this reprimand will be made a permanent part of your personnel file. Additionally, a copy of this memorandum is being forwarded to your chain-of-command to be noted in your annual Performance Management Plus (PMP).

CS/bs

cc: Colonel Steube
Major Hagaman
Captain Kaufman
Captain Couch
Lieutenant Vitaioli
Lieutenant Carr
Accreditation
FISCAL Management
Off-Duty Security
Personnel
Professional Standards
Training



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 721-6753
Administrative/Executive (941) 749-5401

TO: SHERIFF CHARLES B. WELLS

THRU: CAPTAIN KAUFMAN *AK 3/24/05*
CRIMINAL INVESTIGATIVE DIVISION

MAJOR SHINGLEDECKER
CRIMINAL INVESTIGATIVE BUREAU

CHIEF INSPECTOR JUDY *CPJ 4/1/05*
PROFESSIONAL STANDARDS

FROM: LIEUTENANT WILLIAM A. VITAIOLI
CRIMINAL INVESTIGATIVE DIVISION

DATE: MARCH 21, 2005

SUBJECT: SUMMARY AND CONCLUSION OF
PROFESSIONAL STANDARDS
ADMINISTRATIVE COMPLAINT
CASE # 2005-031

INVOLVED: DETECTIVE APRIL DUGAN

COMPLAINANT: LIEUTENANT KEITH KEOUGH
CRIMINAL INVESTIGATIVE DIVISION

INVESTIGATOR: LIEUTENANT WILLIAM A. VITAIOLI
CRIMINAL INVESTIGATIVE DIVISION

INITIATED ON: MARCH 16, 2005

COMPLETED ON: MARCH 23, 2005

**ALLEGATIONS: COUNT ONE
INSUBORDINATION/DISOBEDIENCE
G.O. 1013,2.11.2.4**

**FINDING: COUNT ONE
SUSTAINED**

EVIDENCE:

- 1. EXHIBIT "A", ALLEGATION OF
EMPLOYEE MISCONDUCT FORM 87-008
DATED, MARCH 3, 2005, AND
INVESTIGATIVE REPORT FORM 87-009
DATED MARCH 21, 2005.**
- 2. EXHIBIT "B", NOTIFICATION OF
CHARGES/ALLEGATIONS
DETECTIVE APRIL DUGAN
DATED MARCH 17, 2005.**
- 3. EXHIBIT "C", SWORN TAPED
INTERVIEW
DETECTIVE APRIL DUGAN
DATED MARCH 17, 2005.**
- 4. EXHIBIT "D", SWORN TAPED
INTERVIEW
SERGEANT DALE COUCH
DATED MARCH 18, 2005.**
- 5. EXHIBIT "E", SWORN TAPED
INTERVIEW
LIEUTENANT KEITH KEOUGH
DATED MARCH 21, 2005.**

**9. EXHIBIT "F", MANATEE COUNTY
SHERIFF'S OFFICE GENERAL ORDER
1013, 2.11.2.4**

10. MISCELLANEOUS.

**A.C. #2005-031
DETECTIVE APRIL DUGAN**

SYNOPSIS

On March 16, 2005, I was assigned to investigate this A.C. complaint. I reviewed **Exhibit "A"**, which contains the details of the complaint alleging that Detective Dugan had failed to follow an order to go out to a call during her on-call week.

INVESTIGATION

After reviewing the initial complaint form I prepared a question list to be used during Detective Dugan's interview. Prior to the interview Detective Dugan was advised of the allegation against her and was allowed to read and sign **Exhibit "A"**, and **Exhibit "B"**. Both exhibits stated the allegations of the complaint for which this investigation was being conducted.

I also completed question lists for Lieutenant Keough and Sergeant Couch.

DETECTIVE DUGAN

On March 17, 2005, this investigator conducted a sworn taped interview **Exhibit "C"**, with Detective Dugan. Prior to the interview Detective Dugan read and signed a Notification of Charges/Allegations **Exhibit "B"**, and an admonition form along with a F.S.S. 112 form.

[REDACTED]. Detective Dugan then states that

██████████ and the ██████████. Detective Dugan then stated that she told Lieutenant Keough that she would call Sergeant Couch.

Detective Dugan stated that when she spoke to Sergeant Couch by phone that the situation had changed and that they were not going to arrest the suspect and they did not need a search warrant and they would not be recovering property.

Detective Dugan also stated that she thinks that the call originated around 10:00 at night and it was already 01:00 AM and she thinks that they were interviewing the kid all night and if they were not going to arrest the kid they need to let him go to bed because it would of not been a good interview anyway.

Detective Dugan stated that after talking to [redacted] he told her not to come out [redacted] and that she should or probably [redacted] and that was her mistake.

For further see taped interview:

SERGEANT COUCH

On March 18, 2005, this investigator conducted a sworn taped interview **Exhibit "D"**, with Sergeant Couch. Prior to the interview Sergeant Couch read an admonition form along with a F.S.S. 112 form.

Sergeant Couch contacted Lieutenant Keough and [REDACTED] and
[REDACTED] and one of them was talking. [REDACTED] at the
[REDACTED] [REDACTED] [REDACTED] news.

Lieutenant Keough did not know who the assigned detective would be and had Sergeant Couch call Sergeant Huff. There was no response from Sergeant Huff. Lieutenant Keough then told Sergeant Couch that he would have the on-call

Sergeant Couch stated that the information that he had would have required a detective to respond as [REDACTED] they [REDACTED] going to [REDACTED]

Sergeant Couch stated that when he was talking to Detective Dugan on the phone he relayed to her that the [REDACTED] suspect [REDACTED] to [REDACTED] y. Sergeant Couch was not sure if he mentioned locating the handgun.

Sergeant Couch stated that the phone [REDACTED] f [REDACTED] (Detective type questions). After a few minutes of this Sergeant Couch told her that they would take care of it.

[REDACTED] Detective Dugan that the suspect was going to show [REDACTED]

Sergeant Couch stated that he did tell Detective Dugan to not come out due [REDACTED] t [REDACTED] h. Detective Dugan was also telling Sergeant Couch to get answers to questions for her. Sergeant Couch felt that she was not going to come out because [REDACTED]

Sergeant Couch stated that the only change in information between Lieutenant Keough and Detective Dugan was possibly that the gun was not going to be recovered. Patrol was still trying to recover a stolen law enforcement badge and they eventually recovered 119 pieces of property from the suspect's home.

For further see taped interview:

LIEUTENANT KEOUGH

On March 21, 2005, this investigator conducted a sworn taped interview **Exhibit "E"**, with Lieutenant Keough. Prior to the interview Lieutenant Keough read an admonition form along with a F.S.S. 112 form.

Lieutenant Keough stated that on March 2, 2005, he was the on-call supervisor for CID. Lieutenant Keough received a phone call from Sergeant Couch who was out

with some of his deputies that had burglary suspects in custody. Sergeant Couch told Lieutenant Keough that they were in the process of trying to locate stolen property. Lieutenant Keough spoke to Sergeant Couch for about 20 minutes and it was very apparent to Lieutenant Keough that a detective was needed for follow up. There were interviews with the suspects to complete, recover property, and possibly recover a stolen gun and police officers badge.

Lieutenant Keough decided to call out Detective Dugan as Detective Johnston who was the other on call detective had already been called out earlier in the week.

Lieutenant stated that he indicated to Detective Dugan that he wanted her to respond out to conduct a follow up. Detective Dugan asked Lieutenant Keough if he knew that she lived outside of Manatee County, which in Lieutenant Keough's opinion was an attempt to not be called out. Lieutenant Keough told Detective Dugan to call Sergeant Couch to find out exactly where he wanted her to go.

Lieutenant Keough was asked if he had made it clear to Detective Dugan that he wanted her to go out to the call and he stated that he would not of called her if he did not intend for her to go out to the call as he does not call detectives for no reason.

Lieutenant Keough stated that after his conversation with Detective Dugan he felt that she was going to respond to the call.

For further see taped interview:

CONCLUSION

DETECTIVE DUGAN

Upon careful review of written documentation contained within this investigation, and a review of the General Orders, Policies and Procedures of the Manatee County Sheriff's Office, I submit a **SUSTAINED** finding to the allegation of Insubordination/Disobedience. This finding is under the violation of the Manatee County Sheriff's Office General Order 1013, 2.11.2.4 which states:

Refusing to obey a proper order from a supervisor.

(Violation subject to reprimand to termination).

On March 2, 2005, Lieutenant Keough made phone contact with Detective Dugan at about 01:30 hours. Lieutenant Keough told Detective Dugan that patrol was out with some burglary suspects and she was needed to respond out. She was told to contact the patrol supervisor Sergeant Couch to find out where he needed her to respond. Detective Dugan contacted Sergeant Couch and after a 10 minute conversation was told to not come out that patrol would handle it.

Detective Dugan states that she did not have specific information on the situation from Lieutenant Keough and that the information had changed between her conversation with Lieutenant Keough and Sergeant Couch. Detective Dugan first stated that Lieutenant Keough did tell her to go out and then she said she was not sure if she was told to respond. Detective Dugan also stated that the call had originated around 10:00 PM and it was now 01:00 AM and if they were not going to arrest the suspect that he should go home and go to bed, as he would not be able to give a good interview. Detective Dugan also stated that Sergeant Couch had told her that she did not need to respond that patrol would handle it.

Lieutenant Keough stated that he did give Detective Dugan good information along with instructions to contact Sergeant Couch to find out where he needed her to respond. Lieutenant Keough stated that Detective Dugan asked him if he knew that she lived out of the county, which in Lieutenant Keough's opinion was an attempt to not be called out.

Lieutenant Keough believed that after his conversation with Detective Dugan that she was going to respond out. Lieutenant Keough stated that he does not call detectives at 01:00 AM for them not to respond out.

Sergeant Couch stated that while speaking to Detective Dugan she advised him to ask the suspect several questions that Sergeant Couch described as (Detective type). Sergeant Couch also told Detective Dugan that the suspect was talking and was going to show them what vehicles that they had broke into.

Sergeant Couch did tell Detective Dugan that she did not need to come out, that patrol would handle it, only because after having to go over everything with Lieutenant Keough he had to do so again with Detective Dugan. Sergeant Couch stated that by the questions Detective Dugan was telling him to ask and their conversation that she did not intend to respond out.

The on call supervisor contacted detective Dugan in order to have her respond out. Detective Dugan makes inconsistent statements through out her interview. Detective Dugan first states that Lieutenant Keough did tell her to go out and then states she wasn't sure if he wanted her to go out.

Detective Dugan also states that the information she obtained from Lieutenant Keough was not specific, however both Lieutenant Keough and Sergeant Couch state that they gave her the same good information.

Detective Dugan also states that the length of the call 10:00 PM to 01:00 AM was a long time for them to be dealing with the suspect and the interview would not of been good. However Sergeant Couch states that Detective Dugan advises him to ask the suspect questions.

Thus barring the introduction of any new evidence or testimony, this investigation will be closed to reflect a **SUSTAINED** finding.



MANATEE COUNTY SHERIFF'S OFFICE
ALLEGATION OF EMPLOYEE MISCONDUCT

AC 2005-060



COMPLAINANT

NAME Larry Arrasmith DATE OF BIRTH _____

ADDRESS 5616 24th Avenue East Palmetto, Fla.

HOME PHONE 941-722-0644 OFFICE PHONE _____

EMPLOYEE

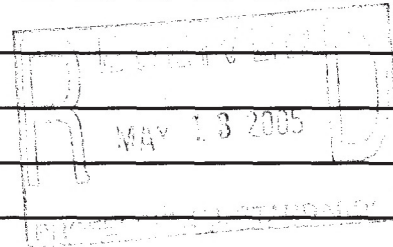
NAME April Dugan ASSIGNMENT CID

SEX F RACE W BADGE/ID/CAR NUMBER _____

OTHER DESCRIPTION _____

Details of the incident. (Use additional sheets, if necessary)

Arrasmith advises that his residence was burglarized approximately four weeks ago. The case number associated with the burglary is 05-18063. Arrasmith advised that he had several conversation with Detective April Dugan and felt that she was rude and unprofessional. He continued by stating that he provided a lead on a suspect and that she did not follow up on that information for several weeks.



I have read and understand this complaint and find it true and correct. It is my desire that this complaint be diligently investigated. I further understand that if the investigation proves these allegations to be false, I may be liable to both civil and criminal prosecution.

Date _____

Signature Of Complainant (Parent/Or Guardian signature if complaint is a minor)

W. Brad Steube

Printed Name Of Receiving Employee

Signature Of Receiving Employee

DISTRIBUTION

COPY TO THE AFFECTED BUREAU CHIEF

ORIGINAL TO PROFESSIONAL STANDARDS

COPY TO THE COMPLAINANT

COPY TO THE SHERIFF/ CHIEF DEPUTY



CHARLES B. WELLS
MANATEE COUNTY, FLORIDA

Sheriff



515 11th Street West
Bradenton, Florida 34205-7727
Telephone (941) 747-3011

Fax Numbers
Criminal Investigation Division (941) 721-6753
Administrative/Executive (941) 749-5401

TO: SHERIFF CHARLES B. WELLS

THRU: CAPTAIN KAUFMAN *DK 5-23-05*
CRIMINAL INVESTIGATIVE DIVISION

MAJOR SHINGLEDECKER *CKB*
CRIMINAL INVESTIGATIVE BUREAU

CHIEF INSPECTOR JUDY
PROFESSIONAL STANDARDS

FROM: LIEUTENANT WILLIAM A. VITAIOLI
CRIMINAL INVESTIGATIVE DIVISION

DATE: MAY 23, 2005

SUBJECT: SUMMARY AND CONCLUSION OF
PROFESSIONAL STANDARDS
ADMINISTRATIVE COMPLAINT
CASE # 2005-060

INVOLVED: DETECTIVE APRIL DUGAN

COMPLAINANT: LARRY ARRASMITH

INVESTIGATOR: LIEUTENANT WILLIAM A. VITAIOLI
CRIMINAL INVESTIGATIVE DIVISION

INITIATED ON: MAY 19, 2005

COMPLETED ON: MAY 23, 2005

ALLEGATIONS:

**COUNT ONE
CONDUCT UNBECOMING A DEPUTY
G.O. 1013, 2.11.1.20**

**COUNT TWO
NEGLECT OF DUTY
G.O. 1013, 2.11.3**

FINDING:

**COUNT ONE
NOT-SUSTAINED**

**COUNT TWO
NOT-SUSTAINED**

EVIDENCE:

- 1. EXHIBIT "A", ALLEGATION OF
EMPLOYEE MISCONDUCT FORM 87-008
AND INVESTIGATIVE REPORT
FORM 87-009 DATED MAY 23, 2005.**
- 2. EXHIBIT "B", SWORN TAPED
INTERVIEW DETECTIVE APRIL DUGAN
DATED MAY 23, 2005.**
- 3. EXHIBIT "C", MANATEE COUNTY
SHERIFF'S OFFICE REPORT #2005-18063
DATED APRIL 12, 2005.**
- 4. EXHIBIT "D", MANATEE COUNTY
SHERIFF'S OFFICE INVESTIGATIVE
REPORT WRITTEN BY DETECTIVE
APRIL DIGAN DATED MAY 13, 2005.**
- 5. EXHIBIT "MISCELLANEOUS"**

A.C. #2005-060

DETECTIVE APRIL DUGAN

SYNOPSIS

On May 19, 2005, I was assigned to investigate this A.C. complaint. I reviewed **Exhibit "A"**, which contains the details of the complaint alleging that Detective Dugan had failed to be polite and professional to the complainant Larry Arrasmith. Also it was alleged that Detective Dugan did not follow up on a lead in a timely manner.

INVESTIGATION

After reviewing the initial complaint form I prepared a question list to be used during Detective Dugan's interview. Prior to the interview Detective Dugan was advised of the allegation against her and was allowed to read **Exhibit "A"**. This exhibit stated the allegations of the complaint for which this investigation was being conducted.

DETECTIVE DUGAN

On May 23, 2005, this investigator conducted a sworn taped interview **Exhibit "B"**, with Detective Dugan who was present with her P.B.A. representative Jerry Childress. Prior to the interview Detective Dugan read the complaint and was given the opportunity to review all the information contained in the investigative packet. Detective Dugan also read and signed an admonition form along with a F.S.S. 112 form.

On or about April 12, 2005, Detective Dugan was assigned case # 2005-18063 **Exhibit "C"**, which is the burglary report of the complainant's residence for investigation. The report states that there were firearms and jewelry taken from the residence. The firearms were not entered into NCIC/FCIC due to no serial

numbers being known by the complainant. It should also be noted that the reporting deputy spent 1-½ hours processing the residence. On April 18, 2005 Detective Dugan called the victim Larry Arrasmith and left a message on his answering machine.

The following is information obtained from Detective Dugan's interview and from her investigative report **Exhibit "D"**.

On April 19, 2005 Detective Dugan spoke to the victim and was advised that his neighbors had a Mexican male working for them during the time that his residence was burglarized and the male was acting suspicious.

Detective Dugan went on vacation on April 21, 2005 and did not return to work until April 26, 2005. On April 30, 2005, Detective Dugan received a message from the victim's wife wanting to know why she had not been contacted about the burglary. Detective Dugan contacted her and advised her that she had been in contact with her husband.

April 30, 2005, Detective Dugan made contact with the victim's neighbor and obtained information on the Mexican male subject. Detective Dugan went by the subject's residence and was able to obtain information on a vehicle parked at the residence. The vehicle was not registered to the subject in question. Detective Dugan conducted pawn searches on the subject with negative results.

On May 11, 2005 Detective Dugan along with Deputy Alvarado contacted the subject and conducted an interview with the subject with Deputy Alvarado translating. Detective Dugan found that the subject was not involved in the burglary and had no knowledge of it.

Detective Dugan is currently awaiting fingerprint results on the case at this time. Detective Dugan stated that she was not rude or unprofessional towards the complainant during her contact with him. Detective Dugan feels that she conducted a proper investigation and follow up on the suspect information.

For further see taped interview:

This writer attempted to contact the complainant on two separate occasions and left messages with his son and with his wife. The contact was an attempt to get details of his complaint. As of this date the complainant has made no contact with this writer even though he was given work and cell phone numbers to call.

CONCLUSION

Upon careful review of written documentation contained within this investigation, and a review of the General Orders, Policies and Procedures of the Manatee County Sheriff's Office, I submit a **NOT-SUSTAINED** finding to the allegation of Count One Conduct Unbecoming a Deputy G.O. 1013, 2.11.1.20, and Count Two Neglect of Duty G.O. 1013, 2.11.3.


On April 12, 2005, Detective Dugan was assigned the complainant's case for investigation. Detective Dugan made contact with the victim/complainant in a timely manner and was given possible suspect information. Detective Dugan does not believe that she was rude or unprofessional to the complainant. Detective Dugan had scheduled vacation time during the next week and did follow up on the suspect information in a timely manner after returning from vacation.

Thus barring the introduction of any new evidence or testimony, this investigation will be closed to reflect a **NOT-SUSTAINED** finding.

MANATEE COUNTY SHERIFF'S OFFICE

MEMORANDUM

TO: Detective April Dugan
Investigative Bureau/CPID

FROM: Colonel J. Hagaman 
Chief Deputy

DATE: March 23, 2010

EFFECTIVE DATE: April 12, 2010

SUBJECT: Disciplinary Action #2269
AC #2010-002

On March 17, 2010, you signed a Waiver of Hearing To Show Cause, accepting the proposed disciplinary action recommended. This disciplinary action is a result of allegations of Neglect of Duty by violation of General Order 1013, paragraph 2.11.3.8, which was sustained against you.

In accordance with General Order 1013, 2.8.5.1, which states: "All suspensions shall begin on the first day of a pay period, and specify the number of hours for which the suspension is effective. An exception would be for the good of the agency." Your 8.6 hour suspension will be taken on:

Monday	April 12, 2010	0830 - 1706	<u>8.6 hours</u>
			8.6 Hours

Additionally, employees shall not work so as to subvert compensation loss during the pay period in which the suspension is in effect, e.g., take Annual Leave in lieu of suspended days, or work in a law enforcement related off-duty job or work overtime during the pay period the suspension is in effect. (G.O. 1013, 2.8.5.2)

Therefore, during the pay period of April 11, 2010 through April 24, 2010, you cannot work or be compensated for more than 77.4 hours without approval of your Bureau Chief or Professional Standards.

During any pay period of suspension, if you are called to work overtime, it is your responsibility to inform the supervisor that you are under suspension and cannot work overtime.

Be advised any future violations of a like offense will prompt stronger disciplinary action.

A copy of this notification will be made a permanent part of your personnel file. Additionally, a copy of this memorandum is being forwarded to your chain-of-command to be noted in your annual Performance Management Plus (PMP).


JH/bs

**cc: Major Shingledecker
Captain Kennedy
Lieutenant Shear
Sergeant Ramdath
Accreditation
Fiscal Management
Off-Duty Security
Personnel
Training
Professional Standards**

MANATEE COUNTY SHERIFF'S OFFICE

M E M O R A N D U M

TO: Detective April Dugan
Investigative Bureau/CPID

FROM: Colonel J. Hagaman 
Chief Deputy

DATE: March 11, 2010

SUBJECT: Proposed Disciplinary Action – DA #2269
AC #2010-002

Charges/Allegations:

An allegation of Neglect of Duty by violation of General Order 1013, 2.11.3.8, has been sustained against you. **For details of this allegation, refer to the Allegation of Employee Misconduct Form (87-008) and Investigative Report on Deputy Misconduct (87-009) attached hereto.**

Proposed Disciplinary Action:

It is proposed that the following disciplinary action take place; that you receive an 8.6 hour suspension without pay. This action, if taken, will be made a permanent part of your personnel file.

Hearing to Show Cause:

I have scheduled an appointment for you on March 31, 2010, at 3:30 P.M. in the Professional Standards office, 600 Hwy. 301 Blvd. West, Suite 202, Bradenton, Florida (Manatee County Sheriff's Office Operations Center). At that time you will be afforded the opportunity to show cause why the proposed disciplinary action should not take place. **(See attached Hearing Procedures)**

Right to Representation:

If you elect to do so, you may bring your attorney(s), representative(s) or any witnesses you desire to testify on your behalf.

Waiver:

If you are in agreement with the proposed disciplinary action, please sign and return the attached waiver to Professional Standards.

JH/bs
Attachment

Cc: Major Shingledecker

**MANATEE COUNTY SHERIFF'S OFFICE
WAIVER**

STATE OF FLORIDA

March 11, 2010

Date

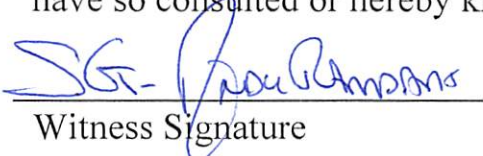
COUNTY OF MANATEE

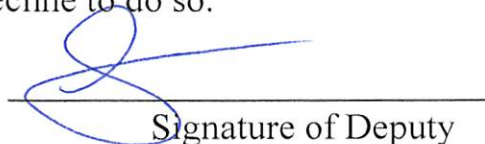
I, **Detective April Dugan**, being fully aware of my rights, do hereby state as follows:

1. That I have been accused of violating Manatee County Sheriff's Office Policies and Procedures, to wit: **General Order 1013, paragraph 2.11.3.8, Neglect of Duty** and was so notified by memorandum dated March 11, 2010.
2. That the proposed disciplinary action for the above violation is:

8.6 hour suspension without pay
3. That I am aware that I have the right to attend a show cause hearing and present reasons why the proposed discipline should not be imposed.
4. That I am aware that I have the further right to appeal any decision reached at the show-cause hearing, either to the Sheriff or the Sheriff's Career Service Appeal Board, depending on the discipline imposed. (Appeal procedures are outlined in General Order 1013)
5. Being fully apprised of and aware of the appeal rights mentioned above, and being fully informed thereon, I hereby knowingly and voluntarily accept the proposed disciplinary action in Paragraph 2, above, and further knowingly and voluntarily waive any right to attend the show-cause hearing and my right to appeal to the Sheriff or Career Service Appeal Board.

By my signature below, I hereby acknowledge that I have read and understand this Waiver. I further acknowledge that I have the right to consult with an attorney or other individual of my choosing prior to signing this Waiver and state that I either have so consulted or hereby knowingly decline to do so.


Witness Signature


Signature of Deputy

3/17/10
Date: