

PERSONNEL ACTION
STATE OF OHIO

AGENCY

DIVISION OR INSTITUTION

UNIT OR OFFICE NO.

FROM:

EXHIBIT

A

to: Cuyahoga County Sanitary Engineer's Office

| | | | | | | | | | | | |
|----------------|------------|---------|----------|------|---------------|----------|----------|--------------|--------|-------|--|
| NAME LAST | | FIRST | | M.I. | DATE OF BIRTH | | | EDUCATION | | | |
| FROM: | LAST | FIRST | M.I. | SEX | MO | DAY | YR | NO. OF YEARS | DEGREE | MAJOR | |
| TO: | Gallagher | Patrick | J. | M | 3 | 12 | 66 | | | | |
| ADDRESS STREET | | CITY | | | STATE | ZIP CODE | COUNTY | | | | |
| FROM: | STREET | | CITY | | | STATE | ZIP CODE | COUNTY | | | |
| TO: | [REDACTED] | | Lakewood | | | OH | 44107 | Cuyahoga | | | |

| | | | | | | | |
|----------------|----------------|----------------------|-----------|------|------------------------|--|-----------|
| EFFECTIVE DATE | PAYROLL NUMBER | POSITION CONTROL NO. | BARG UNIT | FLAG | SOCIAL SECURITY NUMBER | | HQ COUNTY |
| FROM: | | | | | [REDACTED] | | |
| MO | DAY | YR | | | | | |
| 6 | 21 | 04 | | | | | |
| TO: | 50002227 | | | | | | |

| | | | | | | | | | |
|-------------|------------------|-------|------|-----------|------|--------|--------|-------|--------|
| CLASS TITLE | CLASS NO. | RANGE | STEP | BASE RATE | LONG | SUPPL. | SUPPL. | TOTAL | STATUS |
| FROM: | | | | \$10.11 | | | | | P |
| TO: | Radio Dispatcher | | | | | | | | |

| APPOINTMENT | CHANGE | SEPARATION | INTERRUPTION |
|--|---|--|---|
| <input type="checkbox"/> 0 EMERGENCY ENDS _____ <input checked="" type="checkbox"/> 1 FULL TIME PERMANENT <input type="checkbox"/> 2 FULL TIME TEMPORARY ENDS _____ <input type="checkbox"/> 3 FULL TIME SEASONAL ENDS _____ <input type="checkbox"/> 4 PART TIME PERMANENT <input type="checkbox"/> 5 PART TIME TEMPORARY ENDS _____ <input type="checkbox"/> 6 PART TIME SEASONAL ENDS _____ <input type="checkbox"/> 7 INTERMITTENT <input type="checkbox"/> 8 FIXED TERMS SALARIED ENDS _____ <input type="checkbox"/> 9 FIXED TERM PER DIEM <input type="checkbox"/> 10 APPT. DATE CORRECTED <input type="checkbox"/> 11 FULL TIME INTERIM-INTERNAL <input type="checkbox"/> 12 FULL TIME INTERIM-EXTERNAL <input type="checkbox"/> 13 PART TIME INTERIM-INTERNAL <input type="checkbox"/> 14 PART TIME INTERIM-EXTERNAL <input type="checkbox"/> 16 UNIT 11, 12 FULL TIME INTERIM <input type="checkbox"/> 17 ESTABLISHED TERM REGULAR <input type="checkbox"/> 18 ESTABLISHED TERM IRREGULAR <input type="checkbox"/> 20 FULL TIME DISASTER RELIEF <input type="checkbox"/> 21 PART TIME DISASTER RELIEF | <input type="checkbox"/> 1 PROMOTION <input type="checkbox"/> 2 DEMOTION <input type="checkbox"/> 3 LATERAL CLASS CHANGE <input type="checkbox"/> 4 TRANSFER WITHIN AGENCY <input type="checkbox"/> 5 TRANSFER BETWEEN AGENCIES <input type="checkbox"/> 6 CIVIL SERVICE STATUS <input type="checkbox"/> 7 NAME <input type="checkbox"/> 8 APPOINTMENT CHANGE TO _____ <input type="checkbox"/> 9 DISPLACEMENT <input type="checkbox"/> 10 RATE <input type="checkbox"/> 11 REASSIGNMENT <input type="checkbox"/> 12 POSITION CHANGED <input type="checkbox"/> 19 TEMPORARY WORK LEVEL ENDS _____ CLASS _____ RATE _____ STEP _____ <input type="checkbox"/> 20 TEMP REASSIGN BY APPEAL DECISION <input type="checkbox"/> 22 CANCEL INTERIM <input type="checkbox"/> 23 SERVICE CHANGE <input type="checkbox"/> 26 SSN CORRECTION <input type="checkbox"/> 27 GRIEVANCE ADJUSTMENT <input type="checkbox"/> 30 H.Q. COUNTY CHANGE <input type="checkbox"/> OTHER - SEE REMARKS | <input type="checkbox"/> 1 RESIGNED - REGULAR _____ WRITTEN _____ ORAL <input type="checkbox"/> 2 RETIRED <input type="checkbox"/> 3 DISABILITY RETIREMENT <input type="checkbox"/> 4 DECEASED <input type="checkbox"/> 5 REMOVED <input type="checkbox"/> 6 PROBATIONARY REMOVAL <input type="checkbox"/> 7 LAID OFF <input type="checkbox"/> 8 UNCLASSIFIED TERMINATION <input type="checkbox"/> 9 OTHER (SEE REMARKS) <input type="checkbox"/> 10 CANCEL APPOINTMENT <input type="checkbox"/> 12 DISABILITY SEPARATION REINSTATE BY _____ <input type="checkbox"/> 13 INTERIM SEPARATION <input type="checkbox"/> 15 RESIGNED - NOT IN GOOD STANDING <input type="checkbox"/> 16 RESIGNED - NOT RECOMMENDED FOR REHIRE | <input type="checkbox"/> 1 MILITARY LEAVE ENDS _____ <input type="checkbox"/> 2 PERSONAL LEAVE ENDS _____ <input type="checkbox"/> 3 SUSPENSION ENDS _____ <input type="checkbox"/> 6 SEASONAL ENDS _____ <input type="checkbox"/> 7 EDUCATIONAL LEAVE ENDS _____ <input type="checkbox"/> 11 UNION LEAVE ENDS _____ <input type="checkbox"/> 12 END A17 _____ <input type="checkbox"/> 13 END A18 _____ <input type="checkbox"/> 14 LEAVE REDUCTION <input type="checkbox"/> 16 PENALTY FINE <input type="checkbox"/> 18 WORKING SUSPENSION <hr/> REINSTATEMENT <input type="checkbox"/> 1 FROM SEPARATION <input type="checkbox"/> 2 FROM INTERRUPTION <input type="checkbox"/> 3 BE PERSONNEL BD. OF REVIEW <input type="checkbox"/> 4 BY COURT ORDER <input type="checkbox"/> 5 SEPARATION RESCINDED <input type="checkbox"/> 7 BY GRIEVANCE <input type="checkbox"/> 8 BY ARBITRATION AWARD <input type="checkbox"/> 9 REEMPLOYMENT FROM LAYOFF APPT. TYPE _____ <input type="checkbox"/> 10 RECALL FROM LAYOFF APPT. TYPE _____ <hr/> TIME STAMP |

| | | | |
|------------------------|-------------------|----------------------------|----------------|
| DATE OF LAST PROMOTION | CERTIFICATION NO. | DATE OF CONTINUOUS SERVICE | BUDGETED HOURS |
| | | | |

REMARKS: New Hire
 Agenda Date: 6/29/04
 Annual Salary: \$21,028.80

| | | | | |
|---|-----------|---|------|---------------------|
| <input type="checkbox"/> ALL ITEMS ON PRE-HIRE FORM HAVE BEEN COMPLETED | | <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED | | CERTIFICATION _____ |
| APPROVAL OF APPOINTING AUTHORITY | SIGNATURE | DATE | | |
| BERT C. KLAIBER, JR., P.E., P.S., CUYAHOGA COUNTY ENGINEER | | | | |
| SIGNATURE OF RELEASING AUTHORITY | DATE | SIGNATURE OF APPROVER | DATE | |
| ETER LAWSON JONES, BOCC PRESIDENT | | DENNIS MADDEN, HR DIRECTOR | | |



CUYAHOGA COUNTY ENGINEER

ROBERT C. KLAIBER, Jr., P.E., P.S.
2100 Superior Viaduct • Cleveland, Ohio 44113
(216) 348-3800 • FAX 348-3896 • TTD 348-3928

PERSONNEL ACTION (On Payroll)

Effective Date: 6/21/2004

Gallagher Patrick J. [REDACTED] 3/12/1966
NAME: LAST FIRST MIDDLE SOCIAL SECURITY NO. DATE OF BIRTH

[REDACTED] Lakewood OH 44107
ADDRESS: CITY STATE ZIP CODE TELEPHONE #

E.E.O. CODE: 2-8

ADMINISTRATION MAINTENANCE

PAYROLL CODE: _____ DEPT: _____

STATUS: 120 DAY PROBATIONARY PERIOD PROVISIONAL
 Ending 10/18/2004 CERTIFIED UNCLASSIFIED

TYPE OF APPOINTMENT: New Hire

CHANGE: _____

| | | | | |
|-------|---------------|--------------------|-----------------|------------------|
| FROM: | \$0.00 Annual | \$0.00 Bi-wk. | TITLE: | GRADE: |
| TO: | \$10.11 hr. | \$21,028.80 Annual | \$808.80 Bi-wk. | Radio Dispatcher |
| | | | | 1 |

REMARKS:

PROCESSING PROCEDURE:

Patricia A. Souber
HUMAN RESOURCE DIRECTOR

6/17/04
DATE

DEPARTMENT HEAD
Mahe Chambers CPA
FISCAL OFFICER

DATE
6-21-04
DATE

AUTHORIZATION APPOINTING AUTHORITY:

Robert C. Klaiber, Jr., P.E., P.S.
Robert C. Klaiber, Jr., P.E., P.S.
Cuyahoga County Engineer

6/18/2004
DATE

PERSONNEL ACTION
STATE OF OHIO

AGENCY: Cuyahoga County Sanitary Engineer's Office DIVISION OR INSTITUTION: _____ UNIT OR OFFICE: _____

EXHIBIT

B

TO:

| | | | | | | | | | | |
|---------|-----------|---------|------|------|----|-----|-------|--------------|--------|--------|
| NAME | LAST | FIRST | M.I. | SEX | MO | DAY | YR | EDUCATION | | |
| FROM: | Gallagher | Patrick | J. | | | | | NO. OF YEARS | DEGREE | MAJOR |
| TO: | | | | | | | | | | |
| ADDRESS | STREET | | | CITY | | | STATE | ZIP CODE | | COUNTY |
| FROM: | | | | | | | | | | |
| TO: | STREET | | | CITY | | | STATE | ZIP CODE | | COUNTY |

| | | | | | | |
|----------------|----------------|----------------------|-----------|------|------------------------|-------------|
| EFFECTIVE DATE | PAYROLL NUMBER | POSITION CONTROL NO. | BARG UNIT | FLAG | SOCIAL SECURITY NUMBER | H.Q. COUNTY |
| FROM: | | | | | | |
| TO: | | | | | | |
| MO | DAY | YR | | | | |
| 7 | 17 | 2006 | | | | |

| | | | | | | | | | |
|-------------|----------------------------|-------|------|-------------|------|-------|-------|-------|--------|
| CLASS TITLE | CLASS NO. | RANGE | STEP | BASE RATE | LONG | SUPPL | SUPPL | TOTAL | STATUS |
| FROM: | Radio Dispatcher | | | \$12.77 hr. | | | | | |
| TO: | Grounds/Maintenance Worker | | | \$17.61 hr. | | | | | |

| | | | |
|--|--|--|--|
| <input type="checkbox"/> 0 EMERGENCY ENDS _____ <input type="checkbox"/> 1 FULL TIME PERMANENT <input type="checkbox"/> 2 FULL TIME TEMPORARY ENDS _____ <input type="checkbox"/> 3 FULL TIME SEASONAL ENDS _____ <input type="checkbox"/> 4 PART TIME PERMANENT <input type="checkbox"/> 5 PART TIME TEMPORARY ENDS _____ <input type="checkbox"/> 6 PART TIME SEASONAL ENDS _____ <input type="checkbox"/> 7 INTERMITTENT <input type="checkbox"/> 8 FIXED TERM SALARIED ENDS _____ <input type="checkbox"/> 9 FIXED TERM PER DIEM <input type="checkbox"/> 10 APPT. DATE CORRECTED <input type="checkbox"/> 11 FULL TIME INTERIM INTERNAL <input type="checkbox"/> 12 FULL TIME INTERIM EXTERNAL <input type="checkbox"/> 13 PART TIME INTERIM INTERNAL <input type="checkbox"/> 14 PART TIME INTERIM EXTERNAL <input type="checkbox"/> 16 UNIT 11, 12 FULL TIME INTERIM <input type="checkbox"/> 17 ESTABLISHED TERM REGULAR <input type="checkbox"/> 18 ESTABLISHED TERM IRREGULAR <input type="checkbox"/> 20 FULL TIME DISASTER RELIEF <input type="checkbox"/> 21 PART TIME DISASTER RELIEF | <input checked="" type="checkbox"/> 1 PROMOTION <input type="checkbox"/> 2 DEMOTION <input type="checkbox"/> 3 LATERAL CLASS CHANGE <input type="checkbox"/> 4 TRANSFER WITHIN AGENCY <input type="checkbox"/> 5 TRANSFER BETWEEN AGENCIES <input type="checkbox"/> 6 CIVIL SERVICE STATUS <input type="checkbox"/> 7 NAME <input type="checkbox"/> 8 APPOINTMENT CHANGE TO _____ <input type="checkbox"/> 9 DISPLACEMENT <input checked="" type="checkbox"/> 10 RATE <input type="checkbox"/> 11 REASSIGNMENT <input type="checkbox"/> 12 POSITION CHANGED <input type="checkbox"/> 19 TEMPORARY WORK LEVEL ENDS _____ CLASS _____ RATE _____ STEP _____ <input type="checkbox"/> 20 TEMP REASSIGN BY APPEAL DECISION <input type="checkbox"/> 22 CANCEL INTERIM <input type="checkbox"/> 23 SERVICE CHANGE <input type="checkbox"/> 26 SSN CORRECTION <input type="checkbox"/> 27 GRIEVANCE ADJUSTMENT <input type="checkbox"/> 30 H. Q. COUNTY CHANGE <input type="checkbox"/> OTHER - SEE REMARKS | <input type="checkbox"/> 1 RESIGNED - REGULAR _____ WRITTEN _____ ORAL _____ <input type="checkbox"/> 2 RETIRED <input type="checkbox"/> 3 DISABILITY RETIREMENT <input type="checkbox"/> 4 DECEASED <input type="checkbox"/> 5 REMOVED <input type="checkbox"/> 6 PROBATIONARY REMOVAL <input type="checkbox"/> 7 LAID OFF <input type="checkbox"/> 8 UNCLASSIFIED TERMINATION <input type="checkbox"/> 9 OTHER (SEE REMARKS) <input type="checkbox"/> 10 CANCEL APPOINTMENT <input type="checkbox"/> 12 DISABILITY SEPARATION REINSTATE BY _____ <input type="checkbox"/> 13 INTERIM SEPARATION <input type="checkbox"/> 15 RESIGNED - NOT IN GOOD STANDING <input type="checkbox"/> 16 RESIGNED - NOT RECOMMENDED FOR REHIRE | <input type="checkbox"/> 1 MILITARY LEAVE ENDS _____ <input type="checkbox"/> 2 PERSONAL LEAVE ENDS _____ <input type="checkbox"/> 3 SUSPENSION ENDS _____ <input type="checkbox"/> 6 SEASONAL ENDS _____ <input type="checkbox"/> 7 EDUCATIONAL LEAVE ENDS _____ <input type="checkbox"/> 11 UNION LEAVE ENDS _____ <input type="checkbox"/> 12 END A17 _____ <input type="checkbox"/> 13 END A18 _____ <input type="checkbox"/> 14 LEAVE REDUCTION <input type="checkbox"/> 16 PENALTY FINE <input type="checkbox"/> 18 WORKING SUSPENSION |
| REINSTATEMENT | | | |
| <input type="checkbox"/> 1 FROM SEPARATION <input type="checkbox"/> 2 FROM INTERRUPTION <input type="checkbox"/> 3 BY PERSONNEL BD. OF REVIEW <input type="checkbox"/> 4 BY COURT ORDER <input type="checkbox"/> 5 SEPARATION RESCINDED <input type="checkbox"/> 7 BY GRIEVANCE <input type="checkbox"/> 8 BY ARBITRATION AWARD <input type="checkbox"/> 9 REEMPLOYMENT FROM LAYOFF - APPT. TYPE _____ <input type="checkbox"/> 10 RECALL FROM LAYOFF - APPT. TYPE _____ | | | |
| TIME STAMP | | | |

| | | | |
|------------------------|-------------------|----------------------------|----------------|
| DATE OF LAST PROMOTION | CERTIFICATION NO. | DATE OF CONTINUOUS SERVICE | BUDGETED HOURS |
| | | | |

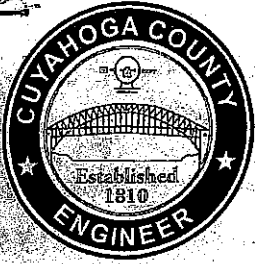
REMARKS: Promotion

Agenda Date: 7/27/06

Annual Salary: \$36,628.80

| | |
|--|---|
| <input type="checkbox"/> ALL ITEMS ON PRE-HIRE FORM HAVE BEEN COMPLETED APPROVAL OF APPOINTING AUTHORITY: <u>[Signature]</u> (SIGNATURE) DATE: <u>5/30/2006</u> Robert C. Kaaber, Jr., P.E., P.S., Cuyahoga County Sanitary Engineer | <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED CERTIFICATION: _____ |
|--|---|

| | |
|---|--|
| SIGNATURE OF RELEASING AUTHORITY: _____ DATE: _____ | SIGNATURE OF APPROVER: _____ DATE: _____ |
|---|--|



CUYAHOGA COUNTY ENGINEER

ROBERT C. KLAIBER, Jr., P.E., P.S.

COUNTY ENGINEER
2100 Superior Viaduct • Cleveland, Ohio 44113
(216) 348-3800 • FAX (216) 348-3896

SANITARY ENGINEER
6100 West Canal Road • Valley View, Ohio 44125
(216) 443-8211 • FAX (216) 443-8236

PERSONNEL ACTION
(On Payroll)

Effective Date: 7/19/06

Gallagher **Patrick** **J.** [REDACTED]
NAME: LAST FIRST MIDDLE SOCIAL SECURITY NO. DATE OF BIRTH

ADDRESS: CITY STATE ZIP CODE TELEPHONE #

E.E.O. CODE: 2-8

ADMINISTRATION _____

MAINTENANCE x

PAYROLL CODE: 540260

DEPT: Maintenance Admin.

STATUS: 120 DAY PROBATIONARY PERIOD x PROVISIONAL _____
Ending CERTIFIED UNCLASSIFIED

TYPE OF APPOINTMENT: Promotion

CHANGE: _____

| | | | | | | | |
|-------|-------------|--------------------|-------------------|--------|----------------------------|--------|------|
| FROM: | \$12.77 hr. | \$26,561.60 Annual | \$1,021.60 Bi-wk. | TITLE: | Radio Dispatcher | GRADE: | 1 11 |
| TO: | \$17.61 hr. | \$36,628.80 Annual | \$1,408.80 Bi-wk. | TITLE: | Grounds/Maintenance Worker | GRADE: | |

REMARKS: Qualified for posted position 05/19/06.

PROCESSING PROCEDURE:

[Signature]
HUMAN RESOURCE DIRECTOR DATE 5-26-06

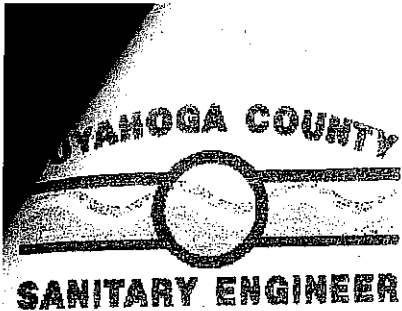
[Signature] 5/26
DEPARTMENT HEAD DATE

[Signature] CPA
FISCAL OFFICER DATE 5-26-06

AUTHORIZATION / APPOINTING AUTHORITY:

[Signature]
Robert C. Klaiber, Jr., P.E., P.S.
Cuyahoga County Engineer DATE 5/30/2006

- County Engineer Construction
2429 Superior Viaduct
Cleveland, Ohio 44113
(216) 348-3838
FAX (216) 698-2353
- County Engineer Bridge Garage
2433 Superior Viaduct
Cleveland, Ohio 44113
(216) 348-3900
FAX (216) 348-3940
- County Engineer Brookpark Yard
4000 Brookpark Road
Cleveland, Ohio 44134
(216) 661-2800
FAX (216) 661-6520
- County Engineer Fitch Yard
7924 Fitch Road
Olmsted Township, Ohio 44138
(440) 235-3091
FAX (440) 235-0292
- County Engineer Miles Yard
19700 Miles Road
Warrensville Hts., Ohio 44128
(216) 662-0440
FAX (216) 662-6971
- County Engineer York Yard
14875 York Road
North Royalton, Ohio 44133
(440) 237-5808
FAX (440) 237-6590



CUYAHOGA COUNTY SANITARY ENGINEER

ROBERT C. KLAIBER, Jr., P.E., P.S.

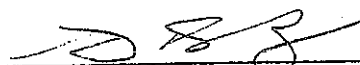
6100 West Canal Road - Valley View, Ohio 44125
(216) 443-8211 - Fax (216) 443-8236

DATE: May 24, 2006
TO: Robert C. Klaiber, P.E., P.S.,
Cuyahoga County Engineer
FROM: Frank Gaul
Director of Operations
SUBJECT: Recommendation for positions for Grounds/Maintenance Worker

The posting for a position of Grounds/Maintenance Worker within the Building and Grounds Department closed on May 19, 2006. Interviews were conducted for three of the applicants on Wednesday, May 24, 2006, by Patricia Gouker and myself.


Based on the necessary qualifications and the results of the interview process, it is recommended that **both** Patrick Gallagher and Edward Mason be selected for the vacant positions of Grounds/Maintenance Worker.

Upon your approval of this recommendation, the Human Resources Department will inform Mr. Gallagher and Mr. Mason.



Kevin F. Payne, Chief of Staff

Recommended Not Recommended



Robert C. Klaiber, Jr., County Engineer

Approved Not Approved

PERSONNEL ACTION
STATE OF OHIO

AGENCY _____ DIVISION OR INSTITUTION _____ UNIT OR OFFICE **C**

EXHIBIT

TO: Cuyahoga County Department of Central Services

| | | | | | | | | | | | |
|----------------------------------|----------------|----------------------|-----------------|-----------------|------------------------|-------------|-----|----|--------------|--------|-------|
| NAME | LAST | FIRST | M.I. | DATE OF BIRTH | SEX | MO | DAY | YR | NO. OF YEARS | DEGREE | MAJOR |
| FROM: | LAST | FIRST | M.I. | | | | | | | | |
| TO: <u>Michael J. [REDACTED]</u> | | | | | | | | | | | |
| ADDRESS | STREET | | CITY | STATE | ZIP CODE | COUNTY | | | | | |
| FROM: | STREET | | CITY | STATE | ZIP CODE | COUNTY | | | | | |
| TO: | [REDACTED] | | <u>Reynolds</u> | <u>OH</u> | <u>44144</u> | | | | | | |
| EFFECTIVE DATE | PAYROLL NUMBER | POSITION CONTROL NO. | BARG UNIT | FLAG | SOCIAL SECURITY NUMBER | H.Q. COUNTY | | | | | |
| FROM: | | | | | | | | | | | |
| MO | DAY | YR | TO: | | | | | | | | |
| <u>02</u> | <u>28</u> | <u>2005</u> | <u>01908308</u> | <u>50015987</u> | <u>NR</u> | | | | | | |

| CLASS TITLE | CLASS NO. | RANGE | STEP | BASE RATE | LONG | SUPPL. | SUPPL. | TOTAL | STATUS |
|----------------------------------|---------------|-----------------|-----------|----------------|------|--------|--------|---------------|----------|
| FROM: | | | | | | | | | |
| TO: <u>Mine Safety Inspector</u> | <u>027211</u> | <u>RS100 05</u> | <u>01</u> | <u>14 0300</u> | | | | <u>4 0300</u> | <u>P</u> |

| APPOINTMENT | CHANGE | SEPARATION | INTERRUPTION |
|---|---|--|---|
| <input type="checkbox"/> 0 EMERGENCY ENDS _____ | <input type="checkbox"/> 1 PROMOTION | <input type="checkbox"/> 1 RESIGNED - REGULAR _____ WRITTEN _____ ORAL | <input type="checkbox"/> 1 MILITARY LEAVE ENDS _____ |
| <input type="checkbox"/> 1 FULL TIME PERMANENT | <input type="checkbox"/> 2 DEMOTION | <input type="checkbox"/> 2 RETIRED | <input type="checkbox"/> 2 PERSONAL LEAVE ENDS _____ |
| <input type="checkbox"/> 2 FULL TIME TEMPORARY ENDS _____ | <input type="checkbox"/> 3 LATERAL CLASS CHANGE | <input type="checkbox"/> 3 DISABILITY RETIREMENT | <input type="checkbox"/> 3 SUSPENSION ENDS _____ |
| <input type="checkbox"/> 3 FULL TIME SEASONAL ENDS _____ | <input type="checkbox"/> 4 TRANSFER WITHIN AGENCY | <input type="checkbox"/> 4 DECEASED | <input type="checkbox"/> 6 SEASONAL ENDS _____ |
| <input type="checkbox"/> 4 PART TIME PERMANENT | <input type="checkbox"/> 5 TRANSFER BETWEEN AGENCIES | <input type="checkbox"/> 5 REMOVED | <input type="checkbox"/> 7 EDUCATIONAL LEAVE ENDS _____ |
| <input type="checkbox"/> 5 PART TIME TEMPORARY ENDS _____ | <input type="checkbox"/> 6 CIVIL SERVICE STATUS | <input type="checkbox"/> 6 PROBATIONARY REMOVAL | <input type="checkbox"/> 11 UNION LEAVE ENDS _____ |
| <input type="checkbox"/> 6 PART TIME SEASONAL ENDS _____ | <input type="checkbox"/> 7 NAME | <input type="checkbox"/> 7 LAID OFF | <input type="checkbox"/> 12 END A17 _____ |
| <input type="checkbox"/> 7 INTERMITTENT | <input type="checkbox"/> 8 APPOINTMENT CHANGE TO _____ | <input type="checkbox"/> 8 UNCLASSIFIED TERMINATION | <input type="checkbox"/> 13 END A18 _____ |
| <input type="checkbox"/> 8 FIXED TERM SALARIED ENDS _____ | <input type="checkbox"/> 9 DISPLACEMENT | <input type="checkbox"/> 9 OTHER (SEE REMARKS) | <input type="checkbox"/> 14 LEAVE REDUCTION |
| <input type="checkbox"/> 9 FIXED TERM PER DIEM | <input type="checkbox"/> 10 RATE | <input type="checkbox"/> 10 CANCEL APPOINTMENT | <input type="checkbox"/> 16 PENALTY FINE |
| <input type="checkbox"/> 10 APPT. DATE CORRECTED | <input type="checkbox"/> 11 REASSIGNMENT | <input type="checkbox"/> 12 DISABILITY SEPARATION REINSTATE BY _____ | <input type="checkbox"/> 18 WORKING SUSPENSION |
| <input type="checkbox"/> 11 FULL TIME INTERIM INTERNAL | <input type="checkbox"/> 12 POSITION CHANGED | <input type="checkbox"/> 13 INTERIM SEPARATION | REINSTATEMENT |
| <input type="checkbox"/> 12 FULL TIME INTERIM EXTERNAL | <input type="checkbox"/> 19 TEMPORARY WORK LEVEL ENDS _____ CLASS _____ RATE _____ STEP _____ | <input type="checkbox"/> 15 RESIGNED - NOT IN GOOD STANDING | <input type="checkbox"/> 1 FROM SEPARATION |
| <input type="checkbox"/> 13 PART TIME INTERIM INTERNAL | <input type="checkbox"/> 20 TEMP REASSIGN BY APPEAL DECISION | <input type="checkbox"/> 16 RESIGNED - NOT RECOMMENDED FOR REHIRE | <input type="checkbox"/> 2 FROM INTERRUPTION |
| <input type="checkbox"/> 14 PART TIME INTERIM EXTERNAL | <input type="checkbox"/> 22 CANCEL INTERIM | | <input type="checkbox"/> 3 BY PERSONNEL BD. OF REVIEW |
| <input type="checkbox"/> 16 UNIT 11, 12 FULL TIME INTERIM | <input type="checkbox"/> 23 SERVICE CHANGE | | <input type="checkbox"/> 4 BY COURT ORDER |
| <input type="checkbox"/> 17 ESTABLISHED TERM REGULAR | <input type="checkbox"/> 26 SSN CORRECTION | | <input type="checkbox"/> 5 SEPARATION RESCINDED |
| <input type="checkbox"/> 18 ESTABLISHED TERM IRREGULAR | <input type="checkbox"/> 27 GRIEVANCE ADJUSTMENT | | <input type="checkbox"/> 7 BY GRIEVANCE |
| <input type="checkbox"/> 20 FULL TIME DISASTER RELIEF | <input type="checkbox"/> 30 H. Q. COUNTY CHANGE | | <input type="checkbox"/> 8 BY ARBITRATION AWARD |
| <input type="checkbox"/> 21 PART TIME DISASTER RELIEF | <input type="checkbox"/> OTHER - SEE REMARKS | | <input type="checkbox"/> 9 REEMPLOYMENT FROM LAYOFF APPT. TYPE _____ |
| | | | <input type="checkbox"/> 10 RECALL FROM LAYOFF APPT. TYPE _____ |

| | | | |
|------------------------|-------------------|----------------------------|----------------|
| DATE OF LAST PROMOTION | CERTIFICATION NO. | DATE OF CONTINUOUS SERVICE | BUDGETED HOURS |
| | | <u>02/28/2005</u> | |

REMARKS: APPOINTMENT/REPLACEMENT EFFECTIVE FEBRUARY 28, 2005
SEE APPLICATION ATTACHED.
AGENDA DATE: FEBRUARY 10, 2005

| | | |
|---|--------------------------------------|---------------------------------|
| <input type="checkbox"/> ALL ITEMS ON PRE-HIRE FORM HAVE BEEN COMPLETED | <u>02/01/2005</u> | Annual Salary: <u>28,182.40</u> |
| <input type="checkbox"/> APPROVED | <input type="checkbox"/> DISAPPROVED | CERTIFICATION _____ |

| | |
|--|------|
| APPROVAL OF APPOINTING AUTHORITY (SIGNATURE) | DATE |
| <u>TIMOTHY F. HAZAN, PRESIDENT</u> | |

| | | | |
|----------------------------------|------|-----------------------|------|
| SIGNATURE OF RELEASING AUTHORITY | DATE | SIGNATURE OF APPROVER | DATE |
| <u>[Signature]</u> | | <u>[Signature]</u> | |

PERSONNEL ACTION
STATE OF OHIO

AGENCY

DIVISION OR INSTITUTION

UNIT OR OFFICE

FF

EXHIBIT

D

TO: Cuyahoga County Department of Central Services

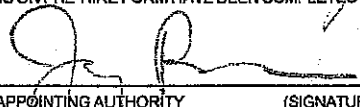
| | | | | | | | | | | | | |
|----------------|---------------------------|----------------|-------|----------------------|---------------|-------|------------------------|--------------|-------------|--------|---------|--------|
| NAME | | LAST | FIRST | M.I. | DATE OF BIRTH | | | | EDUCATION | | | |
| FROM: | LAST | FIRST | M.I. | SEX | MO | DAY | YR | NO. OF YEARS | DEGREE | MAJOR | | |
| TO: | Gallagher | Michael | M. J. | M | 06 | 16 | 1953 | | | | | |
| ADDRESS | | STREET | | | CITY | | STATE | ZIP CODE | | COUNTY | | |
| FROM: | [REDACTED] | | | Brooklyn | OH | 44111 | | | | | | |
| TO: | [REDACTED] | | | Brooklyn | OH | 44111 | | | | | | |
| EFFECTIVE DATE | | PAYROLL NUMBER | | POSITION CONTROL NO. | BARG UNIT | FLAG | SOCIAL SECURITY NUMBER | | H.Q. COUNTY | | | |
| FROM: | MO | DAY | YR | 00206399 | 50003358 | NE | [REDACTED] | | | | | |
| TO: | 10 | 12 | 2008 | | | | | | | | | |
| CLASS TITLE | | | | CLASS NO. | RANGE | STEP | BASE RATE | LONG | SUPPL | SUPPL | 10/1000 | STATUS |
| FROM: | Fire Safety Inspector | | | 01022211 | RANGE 00 | | 19.9300 | | | | | |
| TO: | Safety & Health Coordinat | | | 01021211 | RANGE 10 | 01 | 21.9700 | | | | 21.9700 | P |

| APPOINTMENT | CHANGE | SEPARATION | INTERRUPTION |
|---|--|--|---|
| <input type="checkbox"/> 0 EMERGENCY ENDS _____ | <input type="checkbox"/> 1 PROMOTION | <input type="checkbox"/> 1 RESIGNED - REGULAR | <input type="checkbox"/> 1 MILITARY LEAVE ENDS _____ |
| <input type="checkbox"/> 1 FULL TIME PERMANENT | <input type="checkbox"/> 2 DEMOTION | <input type="checkbox"/> _____ WRITTEN | <input type="checkbox"/> 2 PERSONAL LEAVE ENDS _____ |
| <input type="checkbox"/> 2 FULL TIME TEMPORARY ENDS _____ | <input type="checkbox"/> 3 LATERAL CLASS CHANGE | <input type="checkbox"/> _____ ORAL | <input type="checkbox"/> 3 SUSPENSION ENDS _____ |
| <input type="checkbox"/> 3 FULL TIME SEASONAL ENDS _____ | <input type="checkbox"/> 4 TRANSFER WITHIN AGENCY | <input type="checkbox"/> 2 RETIRED | <input type="checkbox"/> 6 SEASONAL ENDS _____ |
| <input type="checkbox"/> 4 PART TIME PERMANENT | <input type="checkbox"/> 5 TRANSFER BETWEEN AGENCIES | <input type="checkbox"/> 3 DISABILITY RETIREMENT | <input type="checkbox"/> 7 EDUCATIONAL LEAVE ENDS _____ |
| <input type="checkbox"/> 5 PART TIME TEMPORARY ENDS _____ | <input type="checkbox"/> 6 CIVIL SERVICE STATUS | <input type="checkbox"/> 4 DECEASED | <input type="checkbox"/> 11 UNION LEAVE ENDS _____ |
| <input type="checkbox"/> 6 PART TIME SEASONAL ENDS _____ | <input type="checkbox"/> 7 NAME | <input type="checkbox"/> 5 REMOVED | <input type="checkbox"/> 12 END A17 _____ |
| <input type="checkbox"/> 7 INTERMITTENT | <input type="checkbox"/> 8 APPOINTMENT CHANGE TO _____ | <input type="checkbox"/> 6 PROBATIONARY REMOVAL | <input type="checkbox"/> 13 END A18 _____ |
| <input type="checkbox"/> 8 FIXED TERM SALARIED ENDS _____ | <input type="checkbox"/> 9 DISPLACEMENT | <input type="checkbox"/> 7 LAID OFF | <input type="checkbox"/> 14 LEAVE REDUCTION |
| <input type="checkbox"/> 9 FIXED TERM PER DIEM | <input type="checkbox"/> 10 RATE | <input type="checkbox"/> 8 UNCLASSIFIED TERMINATION | <input type="checkbox"/> 16 PENALTY FINE |
| <input type="checkbox"/> 10 APPT. DATE CORRECTED | <input type="checkbox"/> 11 REASSIGNMENT | <input type="checkbox"/> 9 OTHER (SEE REMARKS) | <input type="checkbox"/> 18 WORKING SUSPENSION |
| <input type="checkbox"/> 11 FULL TIME INTERIM INTERNAL | <input type="checkbox"/> 12 POSITION CHANGED | <input type="checkbox"/> 10 CANCEL APPOINTMENT | REINSTATEMENT |
| <input type="checkbox"/> 12 FULL TIME INTERIM EXTERNAL | <input type="checkbox"/> 19 TEMPORARY WORK LEVEL | <input type="checkbox"/> 12 DISABILITY SEPARATION | <input type="checkbox"/> 1 FROM SEPARATION |
| <input type="checkbox"/> 13 PART TIME INTERIM INTERNAL | ENDS _____ CLASS _____ | REINSTATE BY _____ | <input type="checkbox"/> 2 FROM INTERRUPTION |
| <input type="checkbox"/> 14 PART TIME INTERIM EXTERNAL | RATE _____ STEP _____ | <input type="checkbox"/> 13 INTERIM SEPARATION | <input type="checkbox"/> 3 BY PERSONNEL BD. OF REVIEW |
| <input type="checkbox"/> 16 UNIT 11, 12 FULL TIME INTERIM | <input type="checkbox"/> 20 TEMP REASSIGN BY APPEAL DECISION | <input type="checkbox"/> 15 RESIGNED - NOT IN GOOD | <input type="checkbox"/> 4 BY COURT ORDER |
| <input type="checkbox"/> 17 ESTABLISHED TERM REGULAR | <input type="checkbox"/> 22 CANCEL INTERIM | STANDING | <input type="checkbox"/> 5 SEPARATION RESCINDED |
| <input type="checkbox"/> 18 ESTABLISHED TERM IRREGULAR | <input type="checkbox"/> 23 SERVICE CHANGE | <input type="checkbox"/> 16 RESIGNED - NOT RECOMMENDED | <input type="checkbox"/> 7 BY GRIEVANCE |
| <input type="checkbox"/> 20 FULL TIME DISASTER RELIEF | <input type="checkbox"/> 26 SSN CORRECTION | FOR REHIRE | <input type="checkbox"/> 8 BY ARBITRATION AWARD |
| <input type="checkbox"/> 21 PART TIME DISASTER RELIEF | <input type="checkbox"/> 27 GRIEVANCE ADJUSTMENT | | <input type="checkbox"/> 9 REEMPLOYMENT FROM LAYOFF |
| | <input type="checkbox"/> 30 H. Q. COUNTY CHANGE | | APPT. TYPE _____ |
| | <input type="checkbox"/> OTHER - SEE REMARKS | | <input type="checkbox"/> 10 RECALL FROM LAYOFF |
| | | | APPT. TYPE _____ |

TIME STAMP
FROM TO

| | | | |
|------------------------|-------------------|----------------------------|----------------|
| DATE OF LAST PROMOTION | CERTIFICATION NO. | DATE OF CONTINUOUS SERVICE | BUDGETED HOURS |
| | | 02/28/2005 | |

REMARKS: PROMOTION FROM A FIRE SAFETY INSPECTOR (05/01) TO A SAFETY AND HEALTH COORDINATOR (10/01) EFFECTIVE 10/12/08 AGENDA 10/7/2008. SEE ATTACHED
 JAMES J. DOWNING PRES ADMIN 09/25/2008
 Annual Salary: 45,697.60

| | | |
|---|--------------------------------------|---------------------|
| <input type="checkbox"/> ALL ITEMS ON PRE-HIRE FORM HAVE BEEN COMPLETED | <input type="checkbox"/> APPROVED | CERTIFICATION _____ |
|  | <input type="checkbox"/> DISAPPROVED | |
| APPROVAL OF APPOINTING AUTHORITY (SIGNATURE) | DATE | |
| JAY ROSS, DIRECTOR | | |

APPLICATION FOR EMPLOYMENT CUYAHOGA COUNTY ENGINEER

Robert C. Klaiber, Jr., P.E., P.S.



**THE CUYAHOGA COUNTY ENGINEER
IS AN EQUAL OPPORTUNITY EMPLOYER**

THE CUYAHOGA COUNTY ENGINEER CONSIDERS APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB-RELATED MEDICAL CONDITION OR HANDICAP, OR ANY OTHER LEGALLY PROTECTED STATUS.

(PRINT FULL NAME)

| | | |
|-------------------------------------|-------|----------|
| NAME, (LAST, FIRST, MIDDLE INITIAL) | | |
| Gallagher, Patrick J. | | |
| TELEPHONE NO. | | |
| [REDACTED] | | |
| STREET | | |
| [REDACTED] | | |
| CITY | STATE | ZIP CODE |
| Lakewood, Ohio | | 44107 |

DEPARTMENT OF HUMAN RESOURCES
3rd FLOOR
2100 SUPERIOR VIADUCT
CLEVELAND, OHIO 44113
216-348-3856
Ohio Relay Service 711

Residential Maintenance

| | | |
|--|---------------------------|--------------------------------|
| Title of position you held before the one above: H&M management | (440)886-0123 | From: Month & Year 6-97 |
| Company Name 6267 Stumph Rd. | Phone Parma Hts., Ohio | To: Month & Year 6-98 |
| Number & Street Jim Antell | City State | Total Number Years Worked 1 |
| Name & Title of Immediate Supervisor Medical | | Hours Worked per Week 40 |
| Reason For Leaving: Residential Maintenance and Repair | | Last Salary \$ 12.00 |

Description of Duties:

| | | |
|---|---------------|--------------------------------|
| Title of position you held before the one above: Foreman, Car Inspector, Car Repairman | | From: Month & Year 7-74 |
| Company Name Penn Central Conrail Railroad | Phone | To: Month & Year 9-83 |
| Number & Street No longer in operation | City State | Total Number Years Worked 9 |
| Name & Title of Immediate Supervisor | | Hours Worked per Week 45 |
| Reason For Leaving: Lay offs | | Last Salary \$ 16.00 |

Description of Duties:

Equipment inspection and repair, crew assignments
safety enforcer

| | | |
|--|---------------|---------------------------|
| Title of position you held before the one above: | | From: Month & Year |
| Company Name | Phone | To: Month & Year |
| Number & Street | City State | Total Number Years Worked |
| Name & Title of Immediate Supervisor | | Hours Worked per Week |
| Reason For Leaving: | | Last Salary \$ |

Description of Duties:

EDUCATION: Name of High School St Ignatius High School

Circle Highest Year Completed: 1 2 3 4 5 6 7 8 9 10 11 **12**

Did you graduate? Yes No If "No", received GED? Yes No

| College or University Name & Address | Dates Attended | | Major | Credit Hours Earned | Graduation Date | Degree or Certificate Awarded |
|--------------------------------------|----------------|------------|-------|---------------------|-----------------|-------------------------------|
| | From Mo./Yr. | To Mo./Yr. | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

All education above a High School diploma must be verified by transcript.

Use this space for additional remarks, special skills, etc., and for other courses, training, or education equivalencies (GED) and for explanation of other items:

Photography, video F.R.A. certified welder, burner, pipefitter crane and forklift operator. Low pressure boiler training.

If you have ever been employed with the State of Ohio or any of its Political Subdivisions, such service will be considered for the purpose of service credit in determining Vacation.

| Agency | From Month/Day/Year | To Month/Day/Year |
|--------|---------------------|-------------------|
| | | |
| | | |

Please provide verification of the above employment and accrued Sick Leave balance to the appropriate Personnel Officer.

Reference (Do Not List Relatives)

| Name | Address | Telephone | Position |
|-------------|----------------------|----------------------|-----------|
| Jim Owens | ████████████████████ | ████████████████████ | President |
| Tom Gibbons | ████████████████████ | ████████████████████ | Advisor |

CERTIFICATE OF APPLICANT: I certify that all statements made in this application are true and complete to the best of my knowledge. I understand that any false statements of material facts will subject me to disqualification or dismissal.

Patrick J. Hallagan

6-14-04

Signature

Date

EXHIBIT

F

CS 42/462

REQUEST FOR CRIMINAL RECORD
CUYAHOGA COUNTY SHERIFF'S OFFICE
CRIMINAL RECORD UNIT

Date 06-16-04 Time _____ a.m.
p.m.

Record of PATRICK JOHN CAGHER

Address _____

Former Addresses _____

Date of Birth 03-12-56 Age 48 Race WHITE Sex M

Social Security No. _____ Other Identification _____

OH D.C. _____

Agency Requesting Record 36 Cuyahoga County Engineer

Signature of Agent _____

Search Made by _____ S.O. Number _____

Information Furnished _____

THIS RECORD CHECK IS PROVIDED AFTER A NAME AND D.O.B. SEARCH OF OUR FILES - POSITIVE IDENTIFICATION IS NEITHER EXPRESSED NOR IMPLIED UNLESS VERIFIED BY THE FINGERPRINTS BELONGING TO THE SUBJECT OF YOUR INQUIRY.

6-22-04 [Signature]
CUYAHOGA COUNTY SHERIFF'S OFFICE
CLEVELAND, OHIO

CONFIDENTIAL

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ISSUED TO: _____

DATE: _____ DEPT.: _____

BY: _____

THIS REPORT IS NOT TO BE COPIED OR GIVEN TO ANY OTHER AGENCY. ITS CONTENTS ARE FOR YOUR INFORMATION ONLY.

7-31-90 DR#-254442 B&E, P.C.T.
9-28-92 B&E, P.C.T. #281977
3-12-95 B&E, P.C.T. #281977
8-23-95 Prob. Viol. #281977

EXHIBIT

G



Gerald E. Fuerst, Clerk of Courts
Court of Common Pleas - Cuyahoga County, Ohio



CASE SUMMARY

| CASE INFORMATION | DEFENDANT INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|-------|------------|----------|------------|------|------------|------------------|------------|-------------------|------------|-----------|------------|------|------------|------|------------|------|------------|-----------|------------|--------------|---|---------|-------------|---------|-----------------------|---------|-----------------------|---------|---------|---------|-----------------------|---------|---------------------------|
| Number: CR-90-254442-ZA | Number: 106946 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Caption: STATE OF OHIO vs. PATRICK GALLAGHER | Name: PATRICK J GALLAGHER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Status: CASE CLOSED | Status: DEFN LVJAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Judge Name: JAMES D SWEENEY | Date of Birth: 03/12/1956 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PO Name: N/A | Race: WHITE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Next Event: N/A | Sex: MALE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Arrested: N/A | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| BOND INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ACTIONS | CHARGES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Event Date</th> <th style="text-align: left;">Event</th> </tr> </thead> <tbody> <tr><td>06/16/1990</td><td>ARRESTED</td></tr> <tr><td>06/16/1990</td><td>JAIL</td></tr> <tr><td>06/29/1990</td><td>TRANSCRIPT FILED</td></tr> <tr><td>07/17/1990</td><td>INDICTED BINDOVER</td></tr> <tr><td>07/31/1990</td><td>ARRAIGNED</td></tr> <tr><td>07/31/1990</td><td>JAIL</td></tr> <tr><td>07/31/1990</td><td>BAIL</td></tr> <tr><td>09/13/1990</td><td>PLEA</td></tr> <tr><td>10/12/1990</td><td>SENTENCED</td></tr> <tr><td>09/13/1995</td><td>LEAVING JAIL</td></tr> </tbody> </table> | Event Date | Event | 06/16/1990 | ARRESTED | 06/16/1990 | JAIL | 06/29/1990 | TRANSCRIPT FILED | 07/17/1990 | INDICTED BINDOVER | 07/31/1990 | ARRAIGNED | 07/31/1990 | JAIL | 07/31/1990 | BAIL | 09/13/1990 | PLEA | 10/12/1990 | SENTENCED | 09/13/1995 | LEAVING JAIL | <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Statute</th> <th style="text-align: left;">Description</th> </tr> </thead> <tbody> <tr><td>2911.13</td><td>BREAKING AND ENTERING</td></tr> <tr><td>2911.13</td><td>BREAKING AND ENTERING</td></tr> <tr><td>2923.02</td><td>ATTEMPT</td></tr> <tr><td>2911.13</td><td>BREAKING AND ENTERING</td></tr> <tr><td>2923.24</td><td>POSSESSING CRIMINAL TOOLS</td></tr> </tbody> </table> | Statute | Description | 2911.13 | BREAKING AND ENTERING | 2911.13 | BREAKING AND ENTERING | 2923.02 | ATTEMPT | 2911.13 | BREAKING AND ENTERING | 2923.24 | POSSESSING CRIMINAL TOOLS |
| Event Date | Event | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 06/16/1990 | ARRESTED | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 06/16/1990 | JAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 06/29/1990 | TRANSCRIPT FILED | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 07/17/1990 | INDICTED BINDOVER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 07/31/1990 | ARRAIGNED | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 07/31/1990 | JAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 07/31/1990 | BAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 09/13/1990 | PLEA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10/12/1990 | SENTENCED | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 09/13/1995 | LEAVING JAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Statute | Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2911.13 | BREAKING AND ENTERING | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2911.13 | BREAKING AND ENTERING | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2923.02 | ATTEMPT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2911.13 | BREAKING AND ENTERING | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2923.24 | POSSESSING CRIMINAL TOOLS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OTHER DEFENDANTS | OTHER CASES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Other Cases CR-92-282434-ZA CR-92-281977-ZA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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Gerald E. Fuerst, Clerk of Courts
Court of Common Pleas - Cuyahoga County, Ohio



DOCKET INFORMATION

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Case Number **Case Title** **Image Viewer**
 CR-90-254442-ZA STATE OF OHIO vs. PATRICK GALLAGHER [AlternaTIFF](#)

From Date **Sort** **Type Type Type Type Search**

/ /
 Ascending

Descending

| Proceeding Date | Filing Date | Side | Type | Description | Image |
|-----------------|-------------|------|------|---|-------|
| 10/22/1990 | | D | | FEE BILL SUBMITTED BY MICHAEL V. SCHAFFER, ESQ. ...LM 10/22/90 15:36 | |
| 10/13/1990 | | D | | IT IS HEREBY ORDERED THAT MICHAEL SCHAFFER, ESQ., HERETOFORE ASSIGNED AS COUNSEL FOR THE DEFENDANT IN THIS CAUSE, BE ALLOWED THREE HUNDRED THIRTY DOLLARS (\$330.00) FOR SERVICES SO RENDERED. IT IS ORDERED THAT THE COURT CERTIFY SAID AMOUNT TO THE COUNTY AUDITOR AND THE COMMISSIONERS FOR ALLOWANCE AND PAYMENT. ...LT 10/31/90 13:53 | |
| 10/12/1990 | | D | | THE DEFENDANT HEREIN HAVING, ON A FORMER DAY OF COURT ENTERED A PLEA OF GUILTY TO BREAKING AND ENTERING, R. C. 2911.13 AS CHARGED IN COUNTS ONE AND TWO, WAS THIS DAY IN OPEN COURT WITH HIS/HER COUNSEL PRESENT. THEREUPON, THE COURT INQUIRED OF THE SAID DEFENDANT IF HE/SHE HAD ANYTHING TO SAY WHY JUDGMENT SHOULD NOT BE PRONOUNCED AGAINST HIM/HER; AND HAVING NOTHING BUT WHAT HE/SHE HAD ALREADY SAID AND SHOWING NO GOOD AND SUFFICIENT CAUSE WHY JUDGMENT SHOULD NOT BE PRONOUNCED. IT IS THEREFORE, ORDERED AND ADJUDGED BY THE COURT THAT SAID DEFENDANT, PATRICK GALLAGHER, IS SENTENCED TO LORAIN CORRECTIONAL INSTITUTION FOR A TERM OF ONE (1) YEAR ON EACH COUNT TO RUN CONCURRENTLY. EXECUTION OF SENTENCE SUSPENDED. DEFENDANT PLACED ON EIGHTEEN (18) MONTHS PROBATION; PAY RESTITUTION IF ANY; TO MAINTAIN EMPLOYMENT; PAY COSTS. ...CB 10/15/90 13:36 | |
| 09/13/1990 | | D | | NOW COMES THE PROSECUTING ATTORNEY ON BEHALF OF THE STATE OF OHIO AND THE DEFENDANT, PATRICK GALLAGHER, IN OPEN COURT WITH HIS/HER COUNSEL PRESENT AND WAS FULLY ADVISED OF HIS/HER CONSTITUTIONAL RIGHTS. THEREUPON, SAID DEFENDANT | |

RETRACTS HIS/HER FORMER PLEA OF NOT GUILTY HERETOFORE ENTERED, AND FOR PLEA TO SAID INDICTMENT SAYS HE/SHE IS GUILTY OF COUNTS ONE AND TWO BREAKING AND ENTERING ORC 2911.13 AS CHARGED, WHICH PLEA/PLEAS, ON THE RECOMMENDATION OF THE PROSECUTING ATTORNEY IS/ARE ACCEPTED BY THE COURT. ON RECOMMENDATION OF THE PROSECUTOR REMAINING COUNTS NOLLED. IT IS FURTHER ORDERED THAT SAID DEFENDANT BE REFERRED TO THE PROBATION DEPARTMENT FOR PRE-SENTENCE INVESTIGATION AND REPORT. DEFENDANT ON SAME BOND. SENTENCING IS SET FOR OCTOBER 12, 1990 AT 9:30 A. M. ..MB 09/14/90 14:51

08/31/1990 D PRETRIAL HAD. ..MB 09/14/90 14:49

08/22/1990 D PRETRIAL HAD. ..MB 09/14/90 14:49

08/20/1990 D PRETRIAL HAD. ..MB 09/14/90 14:48

08/15/1990 D PRETRIAL HAD. ..MB 09/14/90 14:48

08/07/1990 D MOTION FOR DISCOVERY; FERAN WITH FILE MFD/BOP MAILED AND FILED ..JC4408/10/90 11:55

07/31/1990 D NOW COMES THE PROSECUTING ATTORNEY ON BEHALF OF THE STATE OF OHIO AND THE DEFENDANT IN OPEN COURT WAS FULLY ADVISED OF HIS/HER CONSTITUTIONAL RIGHTS, INCLUDING HIS/HER RIGHT TO COUNSEL. THE DEFENDANT, PATRICK GALLAGHER, ACKNOWLEDGES THAT HE/SHE RECEIVED A COPY OF THE INDICTMENT FROM THE SHERIFF OF CUYAHOGA COUNTY. TWENTY-FOUR HOURS HAVING ELAPSED SINCE SERVICE OF THE INDICTMENT, DEFENDANT IN OPEN COURT WAIVED READING OF THE INDICTMENT. THEREUPON, THE SAID DEFENDANT IN OPEN COURT ENTERS A PLEA OF NOT GUILTY. JUDGE JAMES D. SWEENEY ASSIGNED. ORIGINAL BOND CONTINUED. DEFENDANT INDIGENT, MICHAEL V. SCHAEFER COUNSEL ASSIGNED. -----CORRECTED ENTRY NOTES OF JULY 31, 1990-----MISSPELLING OF COUNSEL'S NAME----- ..FM 08/08/90 15:45

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EXHIBIT **H**



CASE SUMMARY

| CASE INFORMATION | DEFENDANT INFORMATION |
|---|----------------------------------|
| Number: CR-92-281977-ZA | Number: 106946 |
| Caption: STATE OF OHIO vs. PATRICK J GALLAGHER | Name: PATRICK J GALLAGHER |
| Status: CASE CLOSED | Status: DEFN LVJAIL |
| Judge Name: SAM A ZINGALE | Date of Birth: 03/12/1956 |
| PO Name: N/A | Race: WHITE |
| Next Event: N/A | Sex: MALE |
| Arrested: N/A | |

| BOND INFORMATION | | | | | |
|------------------|------------|----------|----------|-------------|---------------------|
| Bond Number | Amount | Type | Date Set | Date Posted | Bondsman/Surety Co. |
| 146276 | \$5,000.00 | 10% CASH | | | |
| 146277 | \$2,000.00 | PERSONAL | | | |

| ACTIONS | CHARGES |
|------------|--------------------|
| Event Date | Event |
| 04/14/1992 | ARRESTED |
| 04/14/1992 | JAIL |
| 04/15/1992 | BAIL |
| 05/11/1992 | TRANSCRIPT FILED |
| 07/16/1992 | INDICTED BINDOVER |
| 08/10/1992 | CAPIAS |
| 08/21/1992 | CAPIAS |
| 09/28/1992 | ARRAIGNED |
| 09/28/1992 | JAIL |
| 09/28/1992 | BAIL |
| 10/29/1992 | CAPIAS |
| 03/27/1994 | BAIL |
| 03/12/1995 | JAIL |
| 03/27/1995 | PLEA |
| 03/30/1995 | REFERRED PROBATION |
| 04/14/1995 | P.S.I. CPT |
| 04/19/1995 | SENTENCED |
| 08/23/1995 | JAIL |
| 09/13/1995 | LEAVING JAIL |

| Statute | Description |
|---------|---------------------------|
| 2911.13 | BREAKING AND ENTERING |
| 2923.24 | POSSESSING CRIMINAL TOOLS |

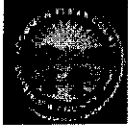
| | |
|-------------------------|--|
| OTHER DEFENDANTS | OTHER CASES Other Cases CR-92-282434-ZA CR-90-254442-ZA |
|-------------------------|--|

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Court of Common Pleas - Cuyahoga County, Ohio



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Case Number **Case Title** **Image Viewer**
 CR-92-281977-ZA STATE OF OHIO vs. PATRICK J GALLAGHER [AlternaTIFF](#)

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| Proceeding Date | Filing Date | Side | Type | Description | Image |
|-----------------|-------------|------|------|---|-------|
| 03/29/1996 | | D | | UPON RECEIPT OF A VERY POSITIVE REPORT BY PROBATION OFFICER, THIS COURT IS AMENDING THE COCAINE/ANONYMOUS, NARCOTICS/ANONYMOUS OR ALCOHOLICS/ANONYMOUS MEETING REQUIREMENT FROM ONE PER DAY TO WHATEVER THE PROBATION OFFICER FEELS IS APPROPRIATE. HEARD BY JUDGE TIMOTHY MCGINTY. ..RXC 04/04/96 14:05. | |
| 08/31/1995 | | D | | DEFENDANT, PATRICK J. GALLAGHER, IN OPEN COURT REPRESENTED BY COUNSEL FOR HEARING ON ALLEGED PROBATION VIOLATION. DEFENDANT WAS FULLY ADVISED OF HIS/HER CONSTITUTIONAL RIGHTS. DEFENDANT INDIGENT AND ATTORNEY WALT CAMINO AND PROBATION OFFICER KELLI RAGLOW PRESENT. HEARING HAD. COURT FINDS DEFENDANT, PATRICK J. GALLAGHER, TO BE A PROBATION VIOLATOR IN THIS CASE AND ORDERS THE DEFENDANT'S PROBATION CONTINUED. DEFENDANT TO BE HELD IN COUNTY JAIL UNTIL BED BECOMES AVAILABLE AT FREEDOM HOUSE. PROBATION OFFICER TO NOTIFY COURT. SHERIFF IS TO TRANSPORT. HEARD BY JUDGE TIMOTHY MCGINTY ..MAB 09/01/95 14:33 | |
| 08/23/1995 | | D | | PROBATION VIOLATION HEARING SET FOR AUGUST 31, 1995 AT 1:30 P.M. PROBATION OFFICER KELLY RAGLOW FOR TRICIA PARENTE (EXT. 5454). PUBLIC DEFENDER'S OFFICE NOTIFIED OF HEARING. HEARD BY JUDGE MCGINTY. ..DMB 08/24/95 09:41 | |
| 06/01/1995 | | D | | IT IS HEREBY ORDERED THAT ALBERT A. GIULIANI, ESQ., HERETOFORE ASSIGNED AS COUNSEL FOR THE DEFENDANT IN THIS CAUSE, BE ALLOWED THREE HUNDRED DOLLARS (\$300.00) FOR SERVICES SO RENDERED. IT IS ORDERED THAT THE COURT CERTIFY SAID AMOUNT TO THE COUNTY AUDITOR AND THE COMMISSIONERS FOR ALLOWANCE AND PAYMENT. AV 73857 HEARD BY JUDGE MCGINTY ..KAM | |

06/01/95 09:34
05/24/1995 D FEE BILL SUBMITTED BY ALBERT A. GIULIANI, ESQ. ..MKE
05/24/95 10:22

04/19/1995 D THE DEFENDANT HEREIN HAVING, ON A FORMER DAY OF
COURT ENTERED A PLEA OF GUILTY TO BREAKING AND
ENTERING, ORC 2911.13 (FELONY-4) AS AMENDED IN COUNT
ONE OF THE INDICTMENT, WAS THIS DAY IN OPEN COURT
WITH HIS/HER COUNSEL PRESENT. ATTORNEY ALBERT
GIULIANI, PRESENT. THEREUPON, THE COURT INQUIRED OF
THE SAID DEFENDANT IF HE/SHE HAD ANYTHING TO SAY WHY
JUDGMENT SHOULD NOT BE PRONOUNCED AGAINST
HIM/HER; AND HAVING NOTHING BUT WHAT HE/SHE HAD
ALREADY SAID AND SHOWING NO GOOD AND SUFFICIENT
CAUSE WHY JUDGMENT SHOULD NOT BE PRONOUNCED. IT IS
THEREFORE, ORDERED AND ADJUDGED BY THE COURT THAT
SAID DEFENDANT, PATRICK J. GALLAGHER, IS SENTENCED
TO LORAIN CORRECTIONAL INSTITUTION, FOR A TERM OF
ONE (1) YEAR AND PAY COSTS. EXECUTION OF SENTENCE
SUSPENDED. DEFENDANT PLACED ON TWO (2) YEARS
PROBATION ON CONDITIONS: DRUG AND ALCOHOL-
INTENSIVE SPECIAL PROBATION; REPORT ONCE A WEEK
FOR 1 YEAR, 2ND YEAR IT IS UP TO PROBATION OFFICER IF
DEFENDANT NEEDS INTENSIVE SPECIAL PROBATION;
ALCOHOLICS ANONYMOUS MEETING EACH DAY; REGULAR
URINALYSIS FOR ALCOHOL/DRUGS; 100 HOURS OF COURT
COMMUNITY WORK SERVICE AND COURT COSTS; COMPLETE
IN-PATIENT ALCOHOL DRUG TREATMENT PROGRAM; ONCE
IN-PATIENT PROGRAM IS COMPLETE; DEFENDANT TO WORK
FULL-TIME EMPLOYMENT. (WALLET IS TO BE RETURNED TO
DEFENDANT). HEARD BY JUDGE TIMOTHY MCGINTY. ..RXC
04/21/95 11:11

03/27/1995 D NOW COMES THE PROSECUTING ATTORNEY ON BEHALF OF
THE STATE OF OHIO AND THE DEFENDANT, PATRICK J.
GALLAGHER, IN OPEN COURT WITH HIS/HER COUNSEL
PRESENT AND WAS FULLY ADVISED OF HIS/HER
CONSTITUTIONAL RIGHTS. ATTORNEY ALBERT GIULIANI AND
PROSECUTOR JAY GALLAGHER PRESENT. ON
RECOMMENDATION OF PROSECUTOR COUNT ONE AMENDED
TO DELETE FURTHERMORES. THEREUPON, SAID DEFENDANT
RETRACTS HIS/HER FORMER PLEA OF NOT GUILTY
HERETOFORE ENTERED, AND FOR PLEA TO SAID
INDICTMENT SAYS HE/SHE IS GUILTY OF BREAKING AND
ENTERING, RC 2911.13, F-4, AS AMENDED IN COUNT ONE,
WHICH PLEA/PLEAS, ON THE RECOMMENDATION OF THE
PROSECUTING ATTORNEY IS/ARE ACCEPTED BY THE COURT.
ON RECOMMENDATION OF PROSECUTOR COUNT TWO IS
NOLLED. IT IS FURTHER ORDERED THAT SAID DEFENDANT BE
REFERRED TO THE PROBATION DEPARTMENT FOR
PRE-SENTENCE INVESTIGATION AND REPORT. SENTENCING
IS SET FOR APRIL 18, 1995 AT 10:30 A. M. BOND IS REDUCED
TO \$2,000.00 PERSONAL BOND, IF DEFENDANT ENTERS A
HALF-WAY HOUSE, ACCREDITED, SHERIFF TO RELEASE
DEFENDANT. HEARD BY JUDGE TIMOTHY MCGINTY ..VMA
03/27/95 11:18

03/22/1995 D PRETRIAL IS RE-SET TO MARCH 27, 1995 AT 9:00 A.M. AND TRIAL DATE IS TO BE SCHEDULED ON THAT DATE. HEARD BY JUDGE TIMOTHY MCGINTY ..MAB 03/23/95 09:28

10/29/1992 D ON THE 29TH DAY OF OCTOBER 1992, THE DEFENDANT, PATRICK J. GALLAGHER, FAILING TO APPEAR IN COURT AS HE/SHE WAS BOUND TO DO BY THE CONDITIONS OF HIS/HER RECOGNIZANCE, THE COURT ORDERS THAT THE SAID RECOGNIZANCE, TAKEN HERETOFORE IN THIS CAUSE BE, AND THE SAME IS, FORFEITED ABSOLUTELY. IT IS FURTHER ORDERED THAT THE CLERK SHALL FORTHWITH GIVE AS PROVIDED BY LAW, THE SURETY OF RECORD, NOTICE TO APPEAR IN THIS COURT ON OR BEFORE THE 29TH DAY OF NOVEMBER 1992, AND PRODUCE THE BODY OF SAID DEFENDANT, OR SHOW WHY JUDGMENT SHALL NOT BE ENTERED AGAINST HIM/HER FOR THE AMOUNT OF THE RECOGNIZANCE GIVEN IN THIS CAUSE. IT IS FURTHER ORDERED THAT A CAPIAS BE ISSUED FOR THE SAID DEFENDANT. ..DB 10/29/92 13:18

10/01/1992 D MOTION FOR DISCOVERY, MOTION FOR BILL OF PARTICULARS, REQUEST FOR EVIDENCE NOTICE; FOERSTNER HAS FILE MFD AND BOP MAILED AND FILED ..JC3910/20/92 12:09

09/29/1992 D MOTION FOR DISCOVERY, FOERSTNER WITH FILE MFD AND BOP MAILED AND FILED ..JC3910/20/92 12:09

09/28/1992 D NOW COMES THE PROSECUTING ATTORNEY ON BEHALF OF THE STATE OF OHIO AND THE DEFENDANT IN OPEN COURT WAS FULLY ADVISED OF HIS/HER CONSTITUTIONAL RIGHTS, INCLUDING HIS/HER RIGHT TO COUNSEL. THE DEFENDANT, PATRICK J. GALLAGHER, ACKNOWLEDGES THAT HE/SHE RECEIVED A COPY OF THE INDICTMENT FROM THE SHERIFF OF CUYAHOGA COUNTY. TWENTY-FOUR HOURS HAVING ELAPSED SINCE SERVICE OF THE INDICTMENT, DEFENDANT IN OPEN COURT WAIVED READING OF THE INDICTMENT. THEREUPON, THE SAID DEFENDANT IN OPEN COURT ENTERS A PLEA OF NOT GUILTY. JUDGE SAM A. ZINGALE ASSIGNED. ORIGINAL BOND CONTINUED. DEFENDANT INDIGENT, ALBERT GIULIANI COUNSEL ASSIGNED. JUDGMENT VACATED. ..EH 09/28/92 13:59

08/21/1992 D ON THE 21ST DAY OF AUGUST 1992, THE DEFENDANT, PATRICK J. GALLAGHER, FAILING TO APPEAR IN COURT AS HE/SHE WAS BOUND TO DO BY THE CONDITIONS OF HIS/HER RECOGNIZANCE, THE COURT ORDERS THAT THE SAID RECOGNIZANCE, TAKEN HERETOFORE IN THIS CAUSE BE, AND THE SAME IS, FORFEITED ABSOLUTELY. IT IS FURTHER ORDERED THAT THE CLERK SHALL FORTHWITH GIVE AS PROVIDED BY LAW, THE SURETY OF RECORD, NOTICE TO APPEAR IN THIS COURT ON OR BEFORE THE 21ST DAY OF SEPTEMBER 1992, AND PRODUCE THE BODY OF SAID DEFENDANT, OR SHOW WHY JUDGMENT SHALL NOT BE ENTERED AGAINST HIM/HER FOR THE AMOUNT OF THE RECOGNIZANCE GIVEN IN THIS CAUSE. IT IS FURTHER ORDERED THAT A CAPIAS BE ISSUED FOR THE SAID DEFENDANT. ..EH 08/21/92 12:56

08/10/1992

D

ON THE 10TH DAY OF AUGUST 1992, THE DEFENDANT, PATRICK J. GALLAGHER, FAILING TO APPEAR IN COURT AS HE/SHE WAS BOUND TO DO BY THE CONDITIONS OF HIS/HER RECOGNIZANCE, THE COURT ORDERS THAT THE SAID RECOGNIZANCE, TAKEN HERETOFORE IN THIS CAUSE BE, AND THE SAME IS, FORFEITED ABSOLUTELY. IT IS FURTHER ORDERED THAT THE CLERK SHALL FORTHWITH GIVE AS PROVIDED BY LAW, THE SURETY OF RECORD, NOTICE TO APPEAR IN THIS COURT ON OR BEFORE THE 10TH DAY OF SEPTEMBER 1992, AND PRODUCE THE BODY OF SAID DEFENDANT, OR SHOW WHY JUDGMENT SHALL NOT BE ENTERED AGAINST HIM/HER FOR THE AMOUNT OF THE RECOGNIZANCE GIVEN IN THIS CAUSE. IT IS FURTHER ORDERED THAT A CAPIAS BE ISSUED FOR THE SAID DEFENDANT. ..EH 08/10/92 13:38

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