MEMORANDUM

To: Officer Eric Hall
From: Chief William Benson
Date: March 5, 1998
Subject: Commendation

I recently received the attached letter commending your actions while assisting a stranded motorist. Ms. Viera and her children were quite impressed with your professionalism and caring.

It is always refreshing to receive such favorable letters concerning our officers. Keep up the good work!

sch

Attachment
825 Windsor Street  
Cookeville, TN 38501  
February 20, 1998

Chief of Police  
Cookeville, TN

Dear Sir:

I would like to express my appreciation to the two officers who assisted me on Wednesday night, February 11, when my car had to be towed. It was after dark, around 7 p.m. in a cold, drizzling rain when I stalled on Broad Street, just west of the Maple intersection. Because my battery was dead, the flashers on my car were almost invisible, so I asked my small children to stand on the sidewalk.

A young officer arrived within minutes after I called 911. He immediately called a tow truck, allowed my shivering children to sit in the back of his car (where they were able to warm up), and called a second officer to help push my car out of the street (where it was in a hazardous position for other drivers). The second officer was equally helpful. By the time my car was moved from the street, one of my neighbors had arrived and kept us in her car until the tow truck appeared only a short time later.

In focusing on the needs of my children, I neglected to get the officers' name or to notice their badge numbers. I hope you will convey my appreciation to them for their help and for going beyond their call of duty. My children were well taken care of, and thanks to the foresight of the officers, my car remained in a safe place until the tow truck came. In addition, my boys, though only 6 and 8, were very impressed with the way they were treated also.

Sincerely,

Carroll Viera

Carroll Viera
March 20, 2001

Officer Eric Hall
Cookeville Police Department
PO Box 849
Cookeville, TN 38503

Officer Hall:

Mrs. Sandy Johnson, 268 E. 7th Street, sends you her and her husband’s wholehearted thanks.

CHIEF

It was disturbing to them to have to call the police to dispose of a hypodermic needle that was just lying on the ground. They had never encountered anything like this and are grateful that you responded quickly and showed a compassion for their well-being that reassured them of their trust in police officers.

I want to offer my thanks to you for your continued dedication in striving to keep the citizens of our community safe. You are a valuable asset to the Cookeville Police Department.

Sincerely,

ROBERT E. TERRY
CHIEF OF POLICE

RET/nfs
Employee Personal Data
City of Cookeville

Date: 04-14-97  Mark One: [x] New Employee  [ ] Information Update

NAME: HALL  ERIC  LEE  Soc. Sec. # __________

Last  First  Middle

Address: ________________________________

Telephone #: __________________  Date of Birth: 06-13-66

Spouses Name: HALL  LISA  RENA

Last  First  Middle

Social Security #: __________  Date of Birth: 05-13-61

Dependent: CHELSIE NICOLE HALL

Soc. Sec. #: __________  Date of Birth: 12-24-93

Dependent: ____________________________

Soc. Sec. #: __________  Date of Birth: ______________

Dependent: ____________________________

Soc. Sec. #: __________  Date of Birth: ______________

Dependent: ____________________________

Soc. Sec. #: __________  Date of Birth: ______________

Dependent: ____________________________

Soc. Sec. #: __________  Date of Birth: ______________

Dependent: ____________________________

Soc. Sec. #: __________  Date of Birth: ______________

Race/Ethnic Group:  [x] Alaskan Native  [ ] American Indian  [ ] Asian

[ ] Black  [ ] Hispanic  [x] White

[ ] Other

In Case of Emergency Notify: TERRY AND ROBERTA HALL

Relation: PARENTS  Home Phone: __________________  Work Phone: COURTHOUSE

Employee's Signature

Date: 04/14/97

Form W-4 (2002)

Purpose. Complete Form W-4 so your employer can withhold the correct Federal income tax from your pay. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2002 expires February 16, 2003. See Pub. 505, Tax Withholding and Estimated Tax.

Note: You cannot claim exemption from withholding if (a) your income exceeds $750 and includes more than $250 of unearned income (e.g., interest and dividends) and (b) another person can claim you as a dependent on their tax return.

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earner/two-job situations. Complete all worksheets that apply. However, you may claim fewer (or zero) allowances.

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See line E below.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the Personal Allowances Worksheet below. See Pub. 919, How Do I Adjust My Tax Withholding? for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax.

Purpose. Complete Form W-4 so your employer can withhold the correct Federal income tax from your pay. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2002 expires February 16, 2003. See Pub. 505, Tax Withholding and Estimated Tax.

Note: You cannot claim exemption from withholding if (a) your income exceeds $750 and includes more than $250 of unearned income (e.g., interest and dividends) and (b) another person can claim you as a dependent on their tax return.

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earner/two-job situations. Complete all worksheets that apply. However, you may claim fewer (or zero) allowances.

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See line E below.

Two earners/two jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others.

Nonresident alien. If you are a nonresident alien, see the Instructions for Form 8233 before completing this Form W-4.

Check your withholding. After your Form W-4 takes effect, use Pub. 919 to see how the dollar amount you are having withheld compares to your projected total tax for 2002. See Pub. 919, especially if you used the Two-Earner/Two-Job Worksheet on page 2 and your earnings exceed $125,000 (Single) or $175,000 (Married).

Recent name change? If your name on line 1 differs from that shown on your social security card, call 1-800-727-1213 for a new social security card.

---

Personal Allowances Worksheet (Keep for your records.)

A Enter "1" for yourself if no one else can claim you as a dependent.

1. If you are single and have only one job; or

2. If you are married, have only one job, and your spouse does not work; or

3. If your wages from a second job or your spouse's wages (or the total of both) are $1,000 or less.

B Enter "1" if:

1. If you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.)

2. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax.

C Enter "1" for your spouse. But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.)

D Enter number of dependents (other than your spouse or yourself) you will claim on your tax return.

E Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above).

F Enter "1" if you have at least $1,500 of child or dependent care expenses for which you plan to claim a credit.

(G) Child Tax Credit (including additional child tax credit):

1. If your total income will be between $15,000 and $42,000 ($20,000 and $65,000 if married), enter "1" for each eligible child plus 1 additional if you have three to five eligible children. (Note: Child Tax Credit cannot exceed $1,000.)

2. If your total income will be between $42,000 and $90,000 ($65,000 and $115,000 if married), enter "1" if you have one or two eligible children, and enter "2" if you have three eligible children, "3" if you have four eligible children, or "4" if you have five or more eligible children.

H Add lines A through G and enter total here. Note: This may be different from the number of exemptions you claim on your tax return.

For accuracy, complete all worksheets that apply.

Cut here and give Form W-4 to your employer. Keep the top part for your records.

Employee's Withholding Allowance Certificate

Employee's signature (Form is not valid unless signed)

Date

Office code

Employer identification number

Cat. No. 10220Q
Form W-4 (2000)

Purpose. Complete Form W-4 so your employer can withhold the correct Federal income tax from your pay. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7, and sign the form to validate it. Your exemption for 2000 expires February 16, 2001.

Note: You cannot claim exemption from withholding if (1) your income exceeds $700 and includes more than $250 of unearned income (e.g., interest and dividends) and (2) another person can claim you as a dependent on their tax return.

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 adjust your withholding allowances based on itemized deductions, adjustments to income, or two-earner/two-job situations. Complete all worksheets that apply. They will help you figure the number of withholding allowances you are entitled to claim. However, you may claim fewer (or zero) allowances.

Child tax and higher education credits. For details on adjusting withholding for these and other credits, see Pub. 919, How Do I Adjust My Tax Withholding?

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See line E below.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, you should consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax.

Personal Allowances Worksheet (Keep for your records.)

A. Enter "1" for yourself if no one else can claim you as a dependent.
   - You are single and have only one job; or
   - Your wages from a second job or your spouse's wages (or the total of both) are $1,000 or less

B. Enter "1" if:
   - You are married, have only one job, and your spouse does not work; or
   - Your wages from a second job or your spouse's wages (or the total of both) are $1,000 or less

C. Enter "1" for yourself. But, you may choose to enter "0" if you are married and have either a working spouse or more than one job. (Entering "0" may help you avoid having too little tax withheld.)

D. Enter number of dependents (other than your spouse or yourself) you will claim on your tax return.

E. Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above).

F. Enter "1" if you have at least $1,500 of child or dependent care expenses for which you plan to claim a credit.

G. Child Tax Credit:
   - If your total income will be between $18,000 and $50,000 ($23,000 and $53,000 if married), enter "1" for each eligible child.
   - If your total income will be between $50,000 and $80,000 ($63,000 and $115,000 if married), enter "1" if you have two eligible children.
   - If you have three or four eligible children, enter "3" if you have five or more eligible children.

H. Add lines A through G and enter total here. Note: This may be different from the number of exemptions you claim on your tax return.

For accuracy, complete all worksheets that apply.

Employee's Withholding Allowance Certificate

Type or print your first name and middle initial

Last name

Home address (number and street or rural route)

City or town, state, and ZIP code

Total number of allowances you are claiming (from line H above OR from the applicable worksheet on page 2)

Additional amount, if any, you want withheld from each paycheck

I claim exemption from withholding for 2000, and I certify that I meet BOTH of the following conditions for exemption:
   - Last year I had a right to a refund of ALL Federal income tax withheld because I had NO tax liability AND
   - This year I expect a refund of ALL Federal income tax withheld because I expect to have NO tax liability.

If you meet both conditions, write "EXEMPT" here.

Under penalties of perjury, I certify that the number of withholding allowances claimed on this certificate, or I am entitled to claim exempt status.

Employee's signature (If form is not void unless you sign it)

Date

Employer's name and address (Employer complete lines 8 and 10 only if sending to the IRS.)

Office code (optional)

Employer identification number
Form W-4 (1999)

Purpose. Complete Form W-4 so your employer can withhold the correct Federal income tax from your pay. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7, and sign the form to validate it. Your exemption for 1999 expires February 16, 2000.

Note: You cannot claim exemption from withholding if (1) your income exceeds $700 and includes more than $250 of unearned income (e.g., interest and dividends) and (2) another person can claim you as a dependent on their tax return.

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet. The worksheets on page 2 adjust your withholding allowances based on itemized deductions, adjustments to income, or two-earner/two-job situations. Complete all worksheets that apply. They will help you figure the number of withholding allowances you are entitled to claim. However, you may claim fewer allowances.

Child tax and higher education credits. For details on adjusting withholding for these and other credits, see Pub. 919, Is My Withholding Correct for 1999?

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See line E below.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, you should consider making estimated tax payments using Form 1040-ES. Otherwise, you may owe additional tax.

Two earners/two jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding will usually be most accurate when all allowances are claimed on the Form W-4 prepared for the highest paying job and zero allowances are claimed for the others.

Check your withholding. After your Form W-4 takes effect, use Pub. 919 to see how the dollar amount you are having withheld compares to your estimated total annual tax. Get Pub. 919 especially if you used the Two-Earner/Two-Job Worksheet and your earnings exceed $150,000 (Single) or $200,000 (Married).

Recent name change? If your name on line 1 differs from that shown on your social security card, call 1-800-772-1213 for a new social security card.

---

Personal Allowances Worksheet

A Enter "1" for yourself if no one else can claim you as a dependent

- You are single and have only one job; or
- You are married, have only one job, and your spouse does not work; or
- You wages from a second job or your spouse’s wages (or the total of both) are $1,000 or less.

B Enter "1" if

- You are married and have either a working spouse or two eligible children. enter the total number of withholding allowances that apply. They will help you figure the number of withholding allowances you are entitled to claim. However, you may claim fewer allowances.

C Enter "1" for your spouse. But, you may choose to enter -0- if you are married and have either a working spouse or more than one job. (This may help you avoid having too little tax withheld.)

D Enter number of dependents (other than your spouse or yourself) whom you will claim on your tax return.

E Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above).

F Enter "1" if you have at least $1,500 of child or dependent care expenses for which you plan to claim a credit.

G Child Tax Credit:

- If your total income will be between $20,000 and $50,000 ($23,000 and $55,000 if married), enter "1" for each eligible child.
- If your total income will be between $50,000 and $80,000 ($63,000 and $115,000 if married), enter "1" if you have two eligible children, enter "2" if you have three or four eligible children, or enter "3" if you have five or more eligible children.

H Add lines A through G and enter total here. Note: This amount may be different from the number of exemptions you claim on your return.

---

Form W-4 (Employee’s Withholding Allowance Certificate)

Department of the Treasury
Internal Revenue Service

For Privacy Act and Paperwork Reduction Act Notice, see page 2.

1 Type or print your first name and middle initial

2 Last name

3 Your social security number

4 City or town, state, and ZIP code

5 Total number of allowances you are claiming (from line H above or from the worksheets on page 2 if they apply)

6 Additional amount, if any, you want withheld from each paycheck.

7 I claim exemption from withholding for 1999, and I certify that I meet BOTH of the following conditions for exemption:

- Last year I had a right to a refund of ALL Federal income tax withheld because I had NO tax liability AND
- This year I expect a refund of ALL Federal income tax withheld because I expect to have NO tax liability.

Under penalties of perjury, I certify that I am entitled to the number of withholding allowances claimed on this certificate, or I am entitled to claim exempt status.

Employee's signature

Date

---

Employee’s name and address (Employer: Complete 8 and 10 only if sending to the IRS)

Office code

Employer identification number

Cat. No. 10220Q
Form W-4 (1998)

Purpose. Complete Form W-4 so your employer can withhold the correct Federal income tax from your pay. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7, and sign the form to validate it. Your exemption for 1998 expires February 16, 1999.

Note: You cannot claim exemption from withholding if (1) your income exceeds $700 and includes unearned income (e.g., interest and dividends) and (2) another person can claim you as a dependent on their tax return.

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet. The worksheets on page 2 adjust your withholding allowances based on itemized deductions, adjustments to income, or two-earner/two-job situations. Complete all worksheets that apply. They will help you figure the number of withholding allowances you are entitled to claim. However, you may claim fewer allowances.

New—Child tax and higher education credits. For details on adjusting withholding for these and other credits, see Pub. 919, Is My Withholding Correct for 1998?

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, you should consider making estimated tax payments using Form 1040-ES. Otherwise, you may owe additional tax.

Personal Allowances Worksheet

A Enter "1" for yourself if no one else can claim you as a dependent
   • You are single and have only one job; or
   • You are married, have only one job, and your spouse does not work; or
   • Your wages from a second job or your spouse's wages (the total of both) are $1,000 or less.

B Enter "1" if:
   • You are married, have only one job, and your spouse works.
   • Your wages from a second job or your spouse's wages (the total of both) are $1,000 or less.

C Enter "1" for your spouse. But, you may choose to enter "0" if you are married and have either a working spouse or more than one job. (This may help you avoid having too little tax withheld.)

D Enter number of dependents (other than your spouse or yourself) you claim on your tax return.

E Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above)

F Enter "1" if you have at least $1,500 of child or dependent care expenses for which you plan to claim a credit

G New—Child Tax Credit: • If your total income will be between $16,500 and $47,000 ($21,000 and $60,000 if married), enter "1" for each eligible child. • If your total income will be between $47,000 and $80,000 ($60,000 and $115,000 if married), enter "1" if you have two or three eligible children, or enter "2" if you have four or more

H Add lines A through G and enter total here. Note: This amount may be different from the number of exemptions you claim on your return.

For accuracy, complete all worksheets that apply.

Cut here and give the certificate to your employer. Keep the top part for your records.

Employee's Withholding Allowance Certificate

Employee's signature

Date 04/22/98

Employer's name and address (Employer: Complete 8 and 10 only if sending to the IRS)

Office code (optional)

Employer identification number
Application
For Employment

P. O. Box 998-45 East Broad Street
Cookeville, TN 38503-0998
615-526-9591

This application is a very important part of the selection process. All requested information must be furnished. Please be aware that the information you provide will be used in the job screening process. Therefore, it is important that you be as specific as possible in your description of past and present experiences, training and education.

Answer all questions fully and accurately. If additional space is needed, please use a blank sheet and attach it to the application form. If an item does not apply to you, or if there is no information to be given, please write in the letters "N.A." for not applicable.

All applications are public documents and are open to public inspection and/or publication.

PositionApplied For: Police Officer

Date 12/29/96

Name Hall Eric Lee

Last First Middle

Residential Address

Number Street

City State

Mailing Address

Number Street

City State Zip

Telephone Area Code

Social Security #

The City of Cookeville is an Affirmative Action, Equal Opportunity Employer
EMPLOYMENT EXPERIENCE

Provide the information requested below beginning with your present or last job. Include military assignments.

<table>
<thead>
<tr>
<th>Employer</th>
<th>Dates Employed</th>
<th>Work Performed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nashville TN Metropolitan Police Dept</td>
<td></td>
<td>School Zone traffic enforcement, serving high risk felony warrants</td>
</tr>
<tr>
<td>Telephone 862-6600</td>
<td>From Nov 94</td>
<td>To Present</td>
</tr>
<tr>
<td>Address 200 James Robertson Parkway Nashville, TN</td>
<td>Hourly Rate/Salary: Regular Duty Patrol Officer</td>
<td></td>
</tr>
<tr>
<td>Job Title Police Officer II</td>
<td>Starting</td>
<td>Final</td>
</tr>
<tr>
<td>Supervisor Sgt. Pennington</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reason for Leaving</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Present Employer</td>
<td>11.00</td>
<td>15.14</td>
</tr>
<tr>
<td>Per Hr</td>
<td>Per Hr</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employer</th>
<th>Dates Employed</th>
<th>Work Performed</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Fleetguard Inc</td>
<td>Assembly Work</td>
<td>Quality test work, Forklift Driver, Welder</td>
</tr>
<tr>
<td>Telephone 626-9551</td>
<td>From May 88</td>
<td>To Oct 99</td>
</tr>
<tr>
<td>Address R &amp; B Cookeville TN 38501</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job Title Grade III Welder</td>
<td>Starting</td>
<td>Final</td>
</tr>
<tr>
<td>Supervisor Bobby Allen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reason for Leaving</td>
<td>9.12</td>
<td>10.16</td>
</tr>
<tr>
<td>Per Hr</td>
<td>Per Hr</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employer</th>
<th>Dates Employed</th>
<th>Work Performed</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. General Processing</td>
<td>Assembly Work</td>
<td>Quality test work, Forklift Driver</td>
</tr>
<tr>
<td>Telephone (615) 484-6163</td>
<td>From Jan 88</td>
<td>To Apr 88</td>
</tr>
<tr>
<td>Address PO Box 568 Cookeville, TN 38555</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job Title General Laborer</td>
<td>Starting</td>
<td>Final</td>
</tr>
<tr>
<td>Supervisor Albert Lowe</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reason for Leaving</td>
<td>6.75</td>
<td>6.75</td>
</tr>
<tr>
<td>Better Pay &amp; Benefits</td>
<td>Per Hr</td>
<td>Per Hr</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employer</th>
<th>Dates Employed</th>
<th>Work Performed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone 1-888-846-8688</td>
<td>From Aug 87</td>
<td>To Dec 87</td>
</tr>
<tr>
<td>Address Main Street Vincennes, IN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job Title Resident Assistant</td>
<td>Starting</td>
<td>Final</td>
</tr>
<tr>
<td>Supervisor Ron Campbell</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reason for Leaving</td>
<td>Room &amp; Board</td>
<td></td>
</tr>
</tbody>
</table>

If you need additional space, please continue on a separate sheet of paper.
Form W-4 (1997)

Want More Money In Your Paycheck?
If you expect to be able to take the earned income credit for 1997 and a child lives with you, you may be able to have part of the credit added to your take-home pay. For details, get Form W-5 from your employer.

Purpose. Complete Form W-4 so that your employer can withhold the correct amount of Federal income tax from your pay. Form W-4 may be completed electronically, if your employer has an electronic system. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption From Withholding. Read line 7 of the certificate below to see if you can claim exempt status. If exempt, only complete lines 1, 2, 3, 4, 5, and sign the form to validate it. No Federal income tax will be withheld from your pay. Your exemption expires February 17, 1998.

Form W-4 {1997)

Employee's Withholding Allowance Certificate

Want More Money In Your Paycheck?

Purpose. Complete Form W-4 so that your employer can withhold the correct amount of Federal income tax from your pay. Form W-4 may be completed electronically, if your employer has an electronic system. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption From Withholding. Read line 7 of the certificate below to see if you can claim exempt status. If exempt, only complete lines 1, 2, 3, 4, 5, and sign the form to validate it. No Federal income tax will be withheld from your pay. Your exemption expires February 17, 1998.

Form W-4 (1997)

Want More Money In Your Paycheck?
If you expect to be able to take the earned income credit for 1997 and a child lives with you, you may be able to have part of the credit added to your take-home pay. For details, get Form W-5 from your employer.

Purpose. Complete Form W-4 so that your employer can withhold the correct amount of Federal income tax from your pay. Form W-4 may be completed electronically, if your employer has an electronic system. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption From Withholding. Read line 7 of the certificate below to see if you can claim exempt status. If exempt, only complete lines 1, 2, 3, 4, 5, and sign the form to validate it. No Federal income tax will be withheld from your pay. Your exemption expires February 17, 1998.

Form W-4 {1997)

Employee's Withholding Allowance Certificate

Want More Money In Your Paycheck?

Purpose. Complete Form W-4 so that your employer can withhold the correct amount of Federal income tax from your pay. Form W-4 may be completed electronically, if your employer has an electronic system. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption From Withholding. Read line 7 of the certificate below to see if you can claim exempt status. If exempt, only complete lines 1, 2, 3, 4, 5, and sign the form to validate it. No Federal income tax will be withheld from your pay. Your exemption expires February 17, 1998.

Form W-4 (1997)

Want More Money In Your Paycheck?
If you expect to be able to take the earned income credit for 1997 and a child lives with you, you may be able to have part of the credit added to your take-home pay. For details, get Form W-5 from your employer.

Purpose. Complete Form W-4 so that your employer can withhold the correct amount of Federal income tax from your pay. Form W-4 may be completed electronically, if your employer has an electronic system. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption From Withholding. Read line 7 of the certificate below to see if you can claim exempt status. If exempt, only complete lines 1, 2, 3, 4, 5, and sign the form to validate it. No Federal income tax will be withheld from your pay. Your exemption expires February 17, 1998.

Form W-4 {1997)

Employee's Withholding Allowance Certificate

Want More Money In Your Paycheck?

Purpose. Complete Form W-4 so that your employer can withhold the correct amount of Federal income tax from your pay. Form W-4 may be completed electronically, if your employer has an electronic system. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption From Withholding. Read line 7 of the certificate below to see if you can claim exempt status. If exempt, only complete lines 1, 2, 3, 4, 5, and sign the form to validate it. No Federal income tax will be withheld from your pay. Your exemption expires February 17, 1998.

Form W-4 {1997)

Employee's Withholding Allowance Certificate

Want More Money In Your Paycheck?

Purpose. Complete Form W-4 so that your employer can withhold the correct amount of Federal income tax from your pay. Form W-4 may be completed electronically, if your employer has an electronic system. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption From Withholding. Read line 7 of the certificate below to see if you can claim exempt status. If exempt, only complete lines 1, 2, 3, 4, 5, and sign the form to validate it. No Federal income tax will be withheld from your pay. Your exemption expires February 17, 1998.
City of Cookeville

Agreement for the return of and/or reimbursement for assigned City property

I do hereby acknowledge receipt of the City property listed below that will be used in the course of my employment. I understand that I am responsible for the care and safe keeping of the property. I do further agree to return to the City the property listed below in good working order (normal wear and tear expected), and to reimburse the City for any damaged or lost property.

(List all tools, uniforms, manuals, vehicles and other equipment assigned to the employee; however, vehicles and equipment assigned only for overnight use during on-call time should not be included. Be detailed in your description of the property. After the last item in the list, draw an "x" in the unused space on the form.)

Employee Sign.  Date  Director Sign.  Date
### Occupational Safety & Health Program (Safety Coordinator, Human Resources)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Safety Program</td>
<td></td>
</tr>
<tr>
<td>[ ] Reporting Accidents</td>
<td></td>
</tr>
<tr>
<td>[ ] Personal Protective Equipment (Foot, Eye, Head, etc.)</td>
<td></td>
</tr>
<tr>
<td>[ ] Work Zone Safety</td>
<td></td>
</tr>
<tr>
<td>[ ] Confined Space</td>
<td></td>
</tr>
<tr>
<td>[ ] Drug Testing</td>
<td></td>
</tr>
<tr>
<td>[ ] Right-to-Know Policy</td>
<td></td>
</tr>
<tr>
<td>[ ] Worker's Compensation</td>
<td></td>
</tr>
<tr>
<td>[ ] Panel Physicians</td>
<td></td>
</tr>
<tr>
<td>[ ] Return-to-Work</td>
<td></td>
</tr>
<tr>
<td>[ ] Bloodborne Pathogens</td>
<td></td>
</tr>
<tr>
<td>[ ] Trenching Safety</td>
<td></td>
</tr>
<tr>
<td>[ ] Lumbar Belts/Proper Lifting</td>
<td></td>
</tr>
<tr>
<td>[ ] Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

### General Sign-Up (Compensation/Benefits Coordinator)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Personnel Action Form</td>
<td>[ ] Copy of Required Diploma</td>
</tr>
<tr>
<td>[ ] Personal Data Form</td>
<td>[ ] Copy of Required Certification/License</td>
</tr>
<tr>
<td>[ ] Completed/Signed Application</td>
<td>[ ] Health Insurance Sign-Up</td>
</tr>
<tr>
<td>[ ] Physical Examination Form</td>
<td>[ ] Life Insurance Sign-Up</td>
</tr>
<tr>
<td>[ ] Withholding Form</td>
<td>[ ] Deferred Compensation Sign-Up</td>
</tr>
<tr>
<td>[ ] I-9 Form</td>
<td>[ ] COBRA</td>
</tr>
<tr>
<td>[ ] Copy of Social Security Card</td>
<td>[ ] Elective Insurance</td>
</tr>
<tr>
<td>[ ] Copy of Driver's License</td>
<td>[ ] Christmas Club</td>
</tr>
<tr>
<td>[ ] Other (specify)</td>
<td>[ ] Credit Union</td>
</tr>
</tbody>
</table>

---

**Department Director**

Nicknamed 4/14/97  
**Safety Coordinator**

Nick Nolde  4/14/97  
**Human Resources Director**

Jim Burdett  4/14/97  
**Compensation/Benefits Coordinator**

Lance Byers  4-16-97

The appropriate city official has reviewed the above listed items with me and I understand my duties and responsibilities for the position of **Police Officer** in the **Police** department.

**Employee's Signature**

Frieda Hall 04/16/97

---

**PF-14**
### Undergraduate Academic Record

#### Secondary Schools:
Pendleton Heights High School 00/00 - 00/00

#### Degrees Awarded:
- Associate of Science
- Majors: Law Enforcement, Conservation

#### Admitted Program:
- Vincennes Main Campus
- Associate of Science
- Major: General Studies

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Grade</th>
<th>Credit Hours</th>
<th>Quality Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>SLS-101</td>
<td>Plant + Animal Biology</td>
<td>B</td>
<td>3.0</td>
<td>9.0</td>
</tr>
<tr>
<td>PEP-250</td>
<td>Conservation Enforcement I</td>
<td>B</td>
<td>3.0</td>
<td>9.0</td>
</tr>
<tr>
<td>PEP-255</td>
<td>Wildlife Management</td>
<td>C</td>
<td>3.0</td>
<td>6.0</td>
</tr>
<tr>
<td>PEP-256</td>
<td>Principles Conservation</td>
<td>B</td>
<td>3.0</td>
<td>6.0</td>
</tr>
<tr>
<td>PEP-257</td>
<td>Speech</td>
<td>C</td>
<td>3.0</td>
<td>6.0</td>
</tr>
<tr>
<td>PEP-258</td>
<td>Weight Training</td>
<td>A</td>
<td>1.0</td>
<td>4.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note:** GPA: 2.614

---

**Undergraduate Academic Record**

- **1985 Fall**
  - Reading Techniques: B 2.0 6.0
  - English Composition I: C 3.0 6.0
  - Earth Science: C 3.0 6.0
  - Beginning Algebra: W 3.0 6.0
  - Surv of Printing Techn: B 2.0 6.0
  - Applied Mathematics I: C 3.0 6.0
  - Current GPA: 2.614
  - Combined GPA: 63.0 51.0

- **1986 Spring**
  - General Psychology: B 3.0 5.0
  - English Composition II: B 3.0 6.0
  - Plant + Animal Management: B 3.0 6.0
  - Archery: A 1.0 4.0
  - Intro to Criminology: B 3.0 6.0
  - Current GPA: 2.911
  - Combined GPA: 51.0 43.0

- **1986 Fall**
  - Survey Criminal Justice: B 3.0 9.0
  - Conservation Enforcement I: B 3.0 9.0
  - English Composition II: C 3.0 6.0
  - Fish Management: C 3.0 6.0
  - Intermediate Swimming: W 1.0 0.0
  - Current GPA: 2.911
  - Combined GPA: 51.0 43.0

**Note:** GPA: 2.911

---

**End of Undergraduate Academic Record**
Given at Portion, Florida, the 30th day of June, 1984.

[Signature]

Principal

[Signature]

Superintendent

[Signature]

President

[Signature]

Secretary

[Signature]

Dean

[Signature]

The Board of

The Trustees of

South Portion Community Schools

International High School
RELEASE AND WAIVER OF CLAIMS

COOKEVILLE POLICE DEPARTMENT

Before you will be permitted to take the physical performance test, you must sign this release and waiver of claims form. If for some reason you are not physically capable of taking this test, please do not attempt to since it might result in injury to you.

Release and Waiver of Claims:

I do hereby request permission of the Cookeville Police Department to take the police entrance physical performance exam. If granted, I do hereby release and forever discharge—and by these presents do for myself, my heirs, executors, administrators, and assigns—release and forever discharge the City of Cookeville, the Cookeville Police Department, and CPD agents and employees of and from all claims, demands, actions, or causes of actions, on account of any injuries resulting from taking this test.

[Signature]
Signature of Applicant

Sworn to and subscribed before me this 10th day of Feb., 1997.

[Signature]
Notary Public

My commission expires: June 21, 2000
CIVIL APPLICANT RESPONSE

<table>
<thead>
<tr>
<th>PCN</th>
<th>CIDN</th>
<th>OCA</th>
</tr>
</thead>
<tbody>
<tr>
<td>971198175811</td>
<td>W 510</td>
<td>06/13/66</td>
</tr>
</tbody>
</table>

HALL, ERIC LEE

MNU

SEX M

FPC 08 TT TT TT 10 10 TT TT 10 12

HEN CLASS 8 S 1 T2T 10

S 1 TT 1

TN0710100 POLICE DEPARTMENT DATE FP

COOKEVILLE TN 04/03/97

A SEARCH OF THE FINGERPRINTS ON THE ABOVE

INDIVIDUAL HAS FAILED TO DISCLOSE PRIOR ARREST DATA.

CJIS DIVISION

05/19/97 FEDERAL BUREAU OF INVESTIGATION

** SPECIAL INFORMATION

CIVIL NON-IDENT FINGERPRINT CARD FOR THIS SUBJECT HAS BEEN DESTROYED.

TN0710100
CHIEF
POLICE DEPARTMENT
10 EAST BROAD ST
BOX 849
COOKEVILLE, TN 38501-3210
Certificate of Commendation

METROPOLITAN POLICE DEPARTMENT
Nashville-Davidson County, Tennessee

Is Awarded to

Eric Hall

in recognition of commendable service rendered the citizens of Nashville and Davidson County, Tennessee

HONORABLE MAYOR

CHIEF OF POLICE

March 19, 1997
In Testimony Whereof, this diploma is given, attested with the seal of the University and the signatures of the duly authorized officers of the University and having complied with all other requirements for graduation, is granted therefore upon recommendation of the faculty the title of Associate in Science to

Fritz N. Hull

University and having completed the Course of Study as prescribed by Pimnemes University, the ninetieth day of December, 1957.

E. L. Sanders
Dean of Faculty

John P. Schmeling
Dean of the Board of Trustees

John W. Mansfield
President
Joint Nashville Police-Odd Fellow Award

This is to certify that

Judge John L. Draper

has performed the service of the

Nashville Police Department

as a member of the

Order of the Red Star

The 23rd day of October 1995

John L. Draper

Dedication of Liberty Bell

Friendship

Love

Truth

Courage

Loyalty

Integrity
<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>June 13, 1966</td>
</tr>
<tr>
<td>Place of Birth</td>
<td>Indianapolis, Indiana</td>
</tr>
<tr>
<td>Place of Marriage</td>
<td>Pennsylvania</td>
</tr>
<tr>
<td>Parent's Place of Birth</td>
<td>Tennessee</td>
</tr>
<tr>
<td>Father's Name</td>
<td>Anderson Hall</td>
</tr>
<tr>
<td>Mother's Name</td>
<td>Dorothy Hall</td>
</tr>
<tr>
<td>Certificate Issuing Authority</td>
<td>Department of Health</td>
</tr>
<tr>
<td>Certificate Title</td>
<td>Certificate of Birth</td>
</tr>
<tr>
<td>Certificate Number</td>
<td>11-17-1966</td>
</tr>
<tr>
<td>Certificate Date</td>
<td>1966</td>
</tr>
</tbody>
</table>

This is to certify, that our records show:

Anderson, Dorothy Hall
Indiana, 1966
|-------------|-------------|--------------|------------|-------------|

Left four fingers taken simultaneously:

- L. THUMB
- R. THUMB

Right four fingers taken simultaneously:

- L. THUMB
- R. THUMB

Cookeville Police Department
10 East Broad Street
Cookeville, TN 38501

Reason fingerprinted: Police Applicant
1. **LOOP**

   - **CENTER OF LOOP**
   - **DELTA**

   THE LINES BETWEEN CENTER OF LOOP AND DELTA MUST SHOW

2. **WHORL**

   - **DELTA**

   THESE LINES RUNNING BETWEEN DELTAS MUST BE CLEAR

3. **ARCH**

   - **ARCHES HAVE NO DELTAS**

---

**APPLICANT**

TO OBTAIN CLASSIFIABLE FINGERPRINTS:

1. USE BLACK PRINTER'S INK.
2. DISTRIBUTE INK EVENLY ON INKING SLAB.
3. WASH AND DRY FINGERS THOROUGHLY.
4. ROLL FINGERS FROM NAIL TO NAIL, AND AVOID ALLOWING FINGERS TO SLIP.
5. BE SURE IMPRESSIONS ARERecorded IN CORRECT ORDER.
6. IF AN AMPUTATION OR DEFORMITY MAKES IT IMPOSSIBLE TO PRINT A FINGER, MAKE A NOTATION TO THAT EFFECT IN THE INDIVIDUAL FINGER BLOCK.
7. IF SOME PHYSICAL CONDITION MAKES IT IMPOSSIBLE TO OBTAIN PERFECT IMPRESSIONS, SUBMIT THE BEST THAT CAN BE OBTAINED WITH A MEMO STAPLED TO THE CARD EXPLAINING THE CIRCUMSTANCES.
8. EXAMINE THE COMPLETED PRINTS TO SEE IF THEY CAN BE CLASSIFIED, BEARING IN MIND THAT MOST FINGERPRINTS FALL INTO THE PATTERNS SHOWN ON THIS CARD (OTHER PATTERNS OCCUR INFREQUENTLY AND ARE NOT SHOWN HERE).

**THIS CARD FOR USE BY:**

1. LAW ENFORCEMENT AGENCIES IN FINGERPRINTING APPLICANTS FOR LAW ENFORCEMENT POSITIONS.
2. OFFICIALS OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT, LICENSING, AND PERMITS, AS AUTHORIZED BY STATE STATUTES AND APPROVED BY THE ATTORNEY GENERAL OF THE UNITED STATES, LOCAL AND COUNTY ORDINANCES. UNLESS SPECIFICALLY BASED ON APPLICABLE STATE STATUTES DO NOT SATISFY THIS REQUIREMENT.
3. U.S. GOVERNMENT AGENCIES AND OTHER ENTITIES REQUIRED BY FEDERAL LAW.
4. OFFICIALS OF FEDERALLY CHARTERED OR INSURED BANKING INSTITUTIONS TO PROMOTE OR MAINTAIN THE SECURITY OF THOSE INSTITUTIONS.

**INSTRUCTIONS:**

*1. PRINTS MUST FIRST BE CHECKED THROUGH THE APPROPRIATE STATE IDENTIFICATION BUREAU, AND ONLY THOSE FINGERPRINTS FOR WHICH NO DISQUALIFYING RECORD HAS BEEN FOUND LOCALLY SHOULD BE SUBMITTED FOR FBI SEARCH.*

2. PRIVACY ACT OF 1974 (P.L. 93-579) REQUIRES THAT FEDERAL, STATE, OR LOCAL AGENCIES INFORM INDIVIDUALS WHOSE SOCIAL SECURITY NUMBER IS REQUESTED WHETHER SUCH DISCLOSURE IS MANDATORY OR VOLUNTARY, BASIS OF AUTHORITY FOR SUCH SOLICITATION, AND USES WHICH WILL BE MADE OF IT.

*2. IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN IN SPACE "EMPLOYER AND ADDRESS". THE CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI.*

4. FBI NUMBER, IF KNOWN, SHOULD ALWAYS BE FURNISHED IN THE APPROPRIATE SPACE.

**MISCELLANEOUS NO.: RECORD:** OTHER ARMED FORCES NO., PASSPORT NO. (PP), ALIEN REGISTRATION NO. (AR), PORT SECURITY CARD NO. (PS), SELECTIVE SERVICE NO. (SS), VETERANS' ADMINISTRATION CLAIM NO. (VA).
COOKEVILLE POLICE DEPARTMENT
OFF-DUTY EMPLOYMENT
Request Form

I, Eric Hall (employee's name), respectfully request permission to work security and direct traffic on my off-duty time for department stores, auctions, special events, and related businesses as needed and approved by the Chief of Police.

I further request permission to wear my duty uniform during these activities and to drive my assigned patrol car to the function. The patrol car will be used to signify that a uniformed officer is present and carry out necessary law enforcement activities.

Signature of Requesting Employee

Date

Signature of Approving Supervisor

Date

Signature of Chief of Police

Date

Signature of City Manager

Date
COOKEVILLE POLICE DEPARTMENT
OFF-DUTY EMPLOYMENT
Employee's Form

I, Eric Hall (name of employee), hereby knowingly and voluntarily permanently give up, waive, and release any and all rights I might have (or might later acquire) against the City of Cookeville, or any of its officers or employees for any personal injuries (physical or non-physical) or for property damage that I have (or that I may in the future experience) as a result of my self-employment, my employment by Merchandise (name of employer), or my employment by anyone other than the City of Cookeville.

I recognize that, in the course of my employment, compensation, or direction by anyone other than the City of Cookeville; I will not be covered under the city's workers' compensation and/or liability coverage. My waiver and release of these rights includes, but is not limited to, any right of mine to representation by an attorney, or to indemnification by the City, or to coverage under any workers' compensation or liability policies held by the City.

I agree that I shall not make any claims nor file any lawsuits against the City of Cookeville, its officers, employees, or the TML Risk Management Pool for any such injuries or damages. Should a lawsuit be filed against the City of Cookeville, its officers, employees, or the TML Risk Management Pool as a result of my employment, compensation, and/or direction by anyone other than the City of Cookeville; I agree to defend such lawsuit and to indemnify and hold them harmless from any damages due to my negligence, malfeasance, or misfeasance while working in an off-duty capacity.

WITNESS OUR HANDS, this 20th day of DEC., 2001

Signature of Employee

Signature of Witness

Name of Employee

Name and Title of Witness
MASTER POLICE OFFICER
QUALIFICATION WORKSHEET

Officer's Name: Eric Hall                      Date: 12/09/00

Recommending Supervisor: SGT Bruce Lamb

INSTRUCTIONS: The nominating supervisor will advise/assist the applying officer in filling out this form. The applying officer will fill in the blanks along the left side of the form in the "Qualifying Points" section with the number of points the officer feels appropriate (except in the "Officer Initiated Activities" section). The supervisor will confirm that minimum requirements are met, adjust the value of points assigned as needed, assign a point value for "Officer Initiated Activities", and total all points. If a supervisor adjusts the value of points assigned, the supervisor will write in the new point value and initial the change. For further information, see General Order 120-1 Career Development. Attach additional sheets as necessary.

MINIMUM REQUIREMENTS
(To Be Completed By Supervisor)

Circle appropriate selection:

Yes/No Six (6) years of continuous sworn civilian law enforcement experience, two (2) years must be with the Cookeville Police Department

Yes/No Five (5) years patrol experience

Yes/No Overall satisfactory performance evaluations for past two (2) consecutive years

Yes/No Pass physical fitness test

QUALIFYING POINTS

EDUCATION: (Maximum - 50 Points)

College (Maximum - 20 Points)
(1 Point for Every 5 Semester Hours)

<table>
<thead>
<tr>
<th># of Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Bachelor of Science (20 Points Maximum)</td>
</tr>
<tr>
<td>10</td>
<td>Associate (10 Points Maximum)</td>
</tr>
<tr>
<td></td>
<td>Other</td>
</tr>
</tbody>
</table>

(College courses must be approved by a TN Board of Regents Institution or equivalent.)
Total College Points

Law Enforcement Schools (Maximum – 50 Points)
(1.5 Points for Every 8 Hours)

<table>
<thead>
<tr>
<th># of Points</th>
<th>List Schools Attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.5</td>
<td>TTBRS – 06/18/99</td>
</tr>
<tr>
<td>2.5</td>
<td>Basic SWAT – 05/21/99</td>
</tr>
<tr>
<td>2.5</td>
<td>FTO School – 10/23/98</td>
</tr>
<tr>
<td>7.5</td>
<td>Traffic Accident – 03/27/98</td>
</tr>
<tr>
<td>7.5</td>
<td>Tactical Talk – 12/11/97</td>
</tr>
</tbody>
</table>

(Law Enforcement Schools must be specialized training above generic in-service training.)

31.5 Total Law Enforcement School Points

41.5 TOTAL Points from Education

SPECIAL ASSIGNMENTS:  (Maximum – 20 Points)

<table>
<thead>
<tr>
<th># of Points</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>Active Field Training Officer Program [As Determined by FTO Committee] (10 Points)</td>
</tr>
<tr>
<td></td>
<td>K-9 Officer Program (10 Points)</td>
</tr>
<tr>
<td>10</td>
<td>Critical Response Team (10 Points)</td>
</tr>
<tr>
<td></td>
<td>First Responder (10 Points)</td>
</tr>
<tr>
<td></td>
<td>Crime Scene Technicians (10 Points)</td>
</tr>
</tbody>
</table>
Victim Services Officer (10 Points)
Traffic Accident Specialist (10 Points)
Crisis Team Negotiator (10 Points)
Active Instructor of Certified Law Enforcement Topic and Completion of Instructor Development Course (10 Points)
List Classes: ____________________________________________________________

Other (10 Points) Honor Guard

TOTAL Points from Special Assignments

ADDITIONAL QUALIFYING POINTS: (Maximum – 60 Points)

<table>
<thead>
<tr>
<th># of Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>Years of Law Enforcement Experience as Sworn Civilian Police Officer</td>
</tr>
<tr>
<td></td>
<td>(2 Points Per Year Up To A Maximum Of 40 Points)</td>
</tr>
<tr>
<td>5</td>
<td>Years of Civilian Law Enforcement Related Experience (1 Point Per Year)</td>
</tr>
<tr>
<td>10</td>
<td>No At-Fault Accidents (Last 2 Years - 10 Points) OR (Last Year - 5 Points)</td>
</tr>
<tr>
<td>10</td>
<td>No Negative Counseling (Last 2 Years - 10 Points) OR (Last Year - 5 Points)</td>
</tr>
<tr>
<td></td>
<td>Military Experience (No More Than 1 Point Per Year Of Active Duty Or 1 Point</td>
</tr>
<tr>
<td></td>
<td>Per Two Years Of Guard/Reserve Duty Up To A Maximum Of 5 Points)</td>
</tr>
<tr>
<td>40</td>
<td>Officer Initiated Activities (Up To 40 Points Maximum To Be Given By</td>
</tr>
<tr>
<td></td>
<td>IMMEDIATE SUPERVISOR Along With The Recommendation.)</td>
</tr>
</tbody>
</table>

Self Initiated Activity (5 Points Maximum)
General Shift Productivity and Conviction Rate (10 Points Maximum)
Attitude (10 Points Maximum)
Cooperation (5 Points Maximum)
Commendations, Letters from the Public, etc. (10 Points Maximum)
Other (10 Points Maximum)

TOTAL Points from Additional Qualifying Factors

41.5 Education Points
20 Special Assignments Points
60 Additional Qualifying Points
Overall Point Total
(Minimum of 100 Points Required)

My signature indicates only that I have seen this assessment and does not necessarily mean that I am in agreement.

Officer's Signature: John Hall  Date: 12/29/00

Comments: I appreciate being considered for the Master Police Officer position.

Shift Commander's Signature: Lt. Rank  Date: 12/21/00

[Approve/Disapprove] Comments: Eric, without exception, is the best.

Division Commander's Signature: Capt. J. Jones  Date: 12/28/00

[Approve/Disapprove] Comments: 

Operations Commander's Signature: Ted C. White  Date: 01/02/01


Chief of Police Signature:  Date: 12-00

[Approve/Disapprove] Comments: 
ATTACHMENT B

COKEVILLE POLICE DEPARTMENT
OFF-DUTY EMPLOYMENT
Employee's Form

I, Eric Hall (name of employee), hereby knowingly and voluntarily permanently give up, waive, and release any and all rights I might have (or might later acquire) against the City of Cookeville, or any of its officers or employees for any personal injuries (physical or non-physical) or for property damage that I have (or that I may in the future experience) as a result of my self-employment, my employment by Tuto Inc. (name of employer), or my employment by anyone other than the City of Cookeville.

I recognize that, in the course of my employment, compensation, or direction by anyone other than the City of Cookeville; I will not be covered under the city's workers' compensation and/or liability coverage. My waiver and release of these rights includes, but is not limited to, any right of mine to representation by an attorney, or to indemnification by the City, or to coverage under any workers' compensation or liability policies held by the City.

I agree that I shall not make any claims nor file any lawsuits against the City of Cookeville, its officers, employees, or the TML Risk Management Pool for any such injuries or damages. Should a lawsuit be filed against the City of Cookeville, its officers, employees, or the TML Risk Management Pool as a result of my employment, compensation, and/or direction by anyone other than the City of Cookeville; I agree to defend such lawsuit and to indemnify and hold them harmless from any damages due to my negligence, malfeasance, or misfeasance while working in an off-duty capacity.

WITNESS OUR HANDS; this 7th day of September 2000.

Signature of Employee

Signature of Witness

Name of Employee

Name and Title of Witness
ATTACHMENT D

COOKEVILLE POLICE DEPARTMENT
OFF-DUTY EMPLOYMENT
Employer's Agreement

BE IT REMEMBERED that [name of business], hereinafter called Business, and the City of Cookeville, hereinafter called City, have agreed as follows:

1. Business desires to hire off-duty Cookeville Police officers for use as [type of job offered].

2. Business desires that the off-duty police officers be allowed to wear the uniform of the Cookeville Police Department and on occasion utilize the communication circuit of the Cookeville Police Department for contact with the Cookeville Police Communications Section.

3. The City desires to facilitate and allow such activities so long as it gains no liability of any nature whatsoever from the contracts and agreements between Business and the individual officers.

4. The parties agree that the officers so employed by Business are, during the time of their services to Business, employees of Business and not employees of the City and, therefore, Business agrees to indemnify and hold harmless the City for any and all liability it may have to any person, company, or organization for damages caused by the police officers of the City who are at the time employed by Business.

5. Business knowingly, voluntarily and permanently gives up and waives any and all rights or claims it may have or later acquire against the City of Cookeville or its officers, employees, or insurance policies arising out of or relating to the course of off-duty employment.

6. Business agrees to defend the City of Cookeville or its officers or employees against claims and further agrees not to make a claim upon any insurance held by the City of Cookeville.

7. Business agrees to maintain careful hour records indicating the hour and minute at which the officers become involved in employment by Business and the time at which they cease to be under the employment of Business.
8. Business agrees that the officers will not be directed to perform any duty, while wearing the uniform of the Police Department of the City, which would be inconsistent with the activities the public would expect to observe police officers performing.

9. It is the clear understanding between the City and Business that should any officer leave the premises of Business, during those hours which he/she is working as a Business employee, to pursue ordinary, routine, or other police business of the City, County of Putnam, or State of Tennessee, the City agrees to indemnify and hold harmless Business for any claim, suit, or action arising from the officer's actions while off the premises of Business.

WITNESS OUR HANDS, this 21ST day of July, 20XX.

[Signatures]

Name/Title of Business Representative

Name/Title of Department Representative

[Signatures]
COOKEVILLE POLICE DEPARTMENT
OFF-DUTY EMPLOYMENT
Employee's Form

I, **ERIC HALL** (name of employee), hereby knowingly and voluntarily permanently give up, waive, and release any and all rights I might have (or might later acquire) against the City of Cookeville, or any of its officers or employees for any personal injuries (physical or non-physical) or for property damage that I have (or that I may in the future experience) as a result of my self-employment, my employment by ___________ (name of employer), or my employment by anyone other than the City of Cookeville.

I recognize that, in the course of my employment, compensation, or direction by anyone other than the City of Cookeville; I will not be covered under the city's workers' compensation and/or liability coverage. My waiver and release of these rights includes, but is not limited to, any right of mine to representation by an attorney, or to indemnification by the City, or to coverage under any workers' compensation or liability policies held by the City.

I agree that I shall not make any claims nor file any lawsuits against the City of Cookeville, its officers, employees, or the TML Risk Management Pool for any such injuries or damages. Should a lawsuit be filed against the City of Cookeville, its officers, employees, or the TML Risk Management Pool as a result of my employment, compensation, and/or direction by anyone other than the City of Cookeville; I agree to defend such lawsuit and to indemnify and hold them harmless from any damages due to my negligence, malfeasance, or misfeasance while working in an off-duty capacity.

WITNESS OUR HANDS, this 1st day of **JUNE**, 2008

**Signature of Employee**

**Signature of Witness**

**ERIC HALL**
Name of Employee

**PATROLMAN JAY D. GLECHENZANNEN**
Name and Title of Witness
Cookeville Police Department
Weapon/Tool Authorization Form (9/94)

[Directions: Fill in all blanks that apply. Refer to G.O. 2-1, G.O. 4-1, or the General Departmental Instructor (GDI) for further directions. All forms should be forwarded to the Chief of Police/Operations Commander through the GDI.]

Authorization for Personally owned:
- [ ] Firearm
- [ ] Impact Weapon
- [ ] Non impact Weapon
- [ ] Other

[Weapon/Tool] [Model] [Serial Number] [Trained by/Date]
2.
3.
4.

Type(s) of Ammunition being used: Federal 55gr HP

Most commonly used method of carry: Trunk of vehicle (Patrol Vehicle)

Owner:
I have received training/certification on the approved/appropriate use of the weapon/tool within the Cookeville Police Department's use of force policy.

OR
I wish to use the above tools when appropriate in the line of duty.

OFFICER [Signature] DATE 12/19/99

ARMORER [Signature] DATE 12/17/99

I have approved the use of the above listed weapon(s)/tool(s): 1__2__3__4 (Circle all that apply).

- [ ] Original to P.I.F
- [ ] Copy to GDI (CHIEF OF POLICE/OPERATIONS COMMANDER) [Signature] (DATE) 12/20/99
- [ ] Copy to Employee

Restrictions/Comments: ____________________________________ (09/94)
Cookeville Police Department

Weapon/tool Authorization Form - Instruction Sheet

Purpose: For the approval of all non-issued weapons/tools while in the line of duty.

Procedure: Select type of weapon/tool by choosing the appropriate box.

- **Weapon/Tool:** Fill in the required information.
- **Model:** Fill in the required information. (If applicable)
- **Serial Number:** Fill in the required information. (If applicable)
- **Trained by/Date:** Fill in the required information. (If applicable) The approved instructor should sign and date this section or the requesting officer should fill in the organization's name that did the training.
- **Ammunition:** If you are using a firearm, you may be required by your instructor or the GDI to use certain types of ammunition.
- **Method of Carry:** This will need to be filled in for any weapon. Be specific. (Type of holster and make, belt clip, etc.)
- **Officer:** The officer requesting approval should sign and date this area.
- **Armorer:** Should be signed by a Cookeville Police Department armorer if a firearm passes inspection.

This form will then need to be forwarded to the General Departmental Instructor (GDI).

The Chief of Police may approve or deny any weapon/tool.

The Operations Commander may approve or deny any tool.

Be sure to have this FORM approved before using/carrying any personally owned weapon/tool in the line of duty.

(All members will have a grace period of 45 days from the institution of the FORM.)

*Example of Weapons:* firearms, PR24, Yawara, non-issued aerosol restraint devices, etc.

*Example of Tools:* Cellular Phones, CB's, Scanners, Restraining devices¹, additional emergency lights, any illumination device requiring a power supply from an assigned vehicle, etc.

---

¹ Restraining devices may be scrutinized more carefully than other tools because they can cause injury or death if improperly used. Therefore, special training may be required by the Operations Commander for such devices.
I, [employee's name], respectfully request permission to work security and direct traffic on my off-duty time for department stores, auctions, special events, and related businesses as needed and approved by the Chief of Police.

I further request permission to wear my duty uniform during these activities and to drive my assigned patrol car to the function. The patrol car will be used to signify that a uniformed officer is present and carry out necessary law enforcement activities.

[Signature of Requesting Employee]
04/23/99
Date

[Signature of Approving Supervisor]
4.23.99
Date

[Signature of Chief of Police]
4-26-99
Date

[Signature of City Manager]
4-28-99
Date
COOKEVILLE POLICE DEPARTMENT
OFF-DUTY EMPLOYMENT
Employee's Form

I, Eric Hall, hereby knowingly and voluntarily permanently give up, waive, and release any and all rights I might have (or might later acquire) against the City of Cookeville, or any of its officers or employees for any personal injuries (physical or non-physical) or for property damage that I have (or that I may in the future experience) as a result of my self-employment, my employment by U.S. Post Office S. Willow Ave. (name of employer), or my employment by anyone other than the City of Cookeville.

I recognize that, in the course of my employment, compensation, or direction by anyone other than the City of Cookeville; I will not be covered under the city's workers' compensation and/or liability coverage. My waiver and release of these rights includes, but is not limited to, any right of mine to representation by an attorney, or to indemnification by the City, or to coverage under any workers' compensation or liability policies held by the City.

I agree that I shall not make any claims nor file any lawsuits against the City of Cookeville, its officers, employees, or the TML Risk Management Pool for any such injuries or damages. Should a lawsuit be filed against the City of Cookeville, its officers, employees, or the TML Risk Management Pool as a result of my employment, compensation, and/or direction by anyone other than the City of Cookeville; I agree to defend such lawsuit and to indemnify and hold them harmless from any damages due to my negligence, malfeasance, or misfeasance while working in an off-duty capacity.

WITNESS OUR HANDS, this 23rd day of April, 1999.

Signature of Employee

Signature of Witness

Name of Employee

Name and Title of Witness
ATTACHMENT D

COOKEVILLE POLICE DEPARTMENT
OFF-DUTY EMPLOYMENT
Employer's Agreement

BE IT REMEMBERED that U.S. POST OFFICE, S. WILLOW AV. (name of business), hereinafter called Business, and the City of Cookeville, hereinafter called City, have agreed as follows:

1. Business desires to hire off-duty Cookeville Police officers for use as SECURITY (type of job offered).

2. Business desires that the off-duty police officers be allowed to wear the uniform of the Cookeville Police Department and on occasion utilize the communication circuit of the Cookeville Police Department for contact with the Cookeville Police Communications Section.

3. The City desires to facilitate and allow such activities so long as it gains no liability of any nature whatsoever from the contracts and agreements between Business and the individual officers.

4. The parties agree that the officers so employed by Business are, during the time of their services to Business, employees of Business and not employees of the City and, therefore, Business agrees to indemnify and hold harmless the City for any and all liability it may have to any person, company, or organization for damages caused by the police officers of the City who are at the time employed by Business.

5. Business knowingly, voluntarily and permanently gives up and waives any and all rights or claims it may have or later acquire against the City of Cookeville or its officers, employees, or insurance policies arising out of or relating to the course of off duty employment.

6. Business agrees to defend the City of Cookeville or its officers or employees against claims and further agrees not to make a claim upon any insurance held by the City of Cookeville.

7. Business agrees to maintain careful hour records indicating the hour and minute at which the officers become involved in employment by Business and the time at which they cease to be under the employment of Business.
8. Business agrees that the officers will not be directed to perform any duty, while wearing the uniform of the Police Department of the City, which would be inconsistent with the activities the public would expect to observe police officers performing.

9. It is the clear understanding between the City and Business that should any officer leave the premises of Business, during those hours which he/she is working as a Business employee, to pursue ordinary, routine, or other police business of the City, County of Putnam, or State of Tennessee, the City agrees to indemnify and hold harmless Business for any claim, suit, or action arising from the officer's actions while off the premises of Business.

WITNESS OUR HANDS, this 23rd day of APRIL, 1999.

Harvie McCowan
Signature of Business Representative

G. A. Ayestaran
Signature of Department Representative

Harvie McCowan
Name/Title of Business Representative

SUPERVISOR CUSTOMER SERVICES

G. A. Ayestaran
Name/Title of Department Representative
COOKEVILLE POLICE DEPARTMENT
COUNSELING FORM

EMPLOYEE: Officer Eric Hall

DATE: March 3, 1999

ACTION: This letter is commend your performance in the investigation of illegal drug traffic at 144 Carr Ave. on Jan. 27, 1999. Your initiative to investigate an illegally parked vehicle led to the discovery of a marijuana growing operation.

SUPERVISOR'S COMMENTS:
The arrests made in this case made it possible for the TBI to raid a major marijuana supplier in the Cookeville area. Seized in that raid was over 100 pounds of marijuana and a large sum of cash. I want to take this opportunity to personally thank you for a job well done and encourage you to keep up the good work.

NOTATION/CORRECTIVE ACTION: Job well done.

SUPERVISOR'S SIGNATURE: John Billy

DATE: 3-3-99

EMPLOYEE'S SIGNATURE: Eric Hall

DATE: 03/05/99

white—director
yellow—supervisor
pink—employee

CPD 0304
ACKNOWLEDGEMENT

I, Eric Bell, a patrolman with the Cookeville Police Department, hereby acknowledge that I have been informed that the "Agreement for Training Reimbursement" which I entered into as a requirement for being hired as a new officer is hereby rescinded. I further acknowledge that I have been given the original copy of the agreement from my personnel file and am, therefore, no longer obligated to repay any training cost.

Signature
02/11/99
Date

Signature
02/11/99
Date

Original to Officer
Copy to Personnel File
TO: CITY MANAGER
CITY OF COOKEVILLE

I, Eric Hall, respectfully request permission to work security and direct traffic on my off-time at department stores, auctions, special events, and related businesses on an as needed basis.

I further request permission to wear my duty uniform during these activities and to drive my assigned patrol car to the function. The patrol car will be used only to signify that a uniformed officer is present.

THANK YOU,

[Signature]

APPROVING SUPERVISOR

[Signature]

CHIEF OF POLICE

[Signature]

CITY MANAGER
City of Cookeville

DRUG AND ALCOHOL TESTING POLICY

EMPLOYEE ACKNOWLEDGMENT

As an applicant or an employee, I have carefully read the City of Cookeville drug and alcohol testing policy. I have received a copy of the City of Cookeville drug and alcohol testing policy, understand its requirements, and agree without reservation to follow this policy. As an applicant, I am aware that my offer of employment is conditional upon the results of a drug and/or alcohol test. As an employee, I am aware that I may be required to undergo drug and/or alcohol tests, that I will be informed prior to the drug and/or alcohol test, and that I may be subject to immediate dismissal if I refuse to take the test.

____________________________________
Name of Applicant or Employee

____________________________________
Department

____________________________________
Supervisor

____________________________________
(Signature of Applicant or Employee)

____________________________________
(Signature of Witness)

____________________________________
Social Security Number

____________________________________
Date

____________________________________
Date
PAYROLL CHECK RELEASE AUTHORIZATION

I, Eric L. Hall, do authorize the City of Cookeville to release my payroll check to the below listed individuals if I am unable to receive the check myself. I understand that, without my written consent, no other person will be allowed to receive my payroll check.

Those authorized to receive my check are:

Lisa R. Hall (Wife)

Signature: Eric L. Hall

Date: 04/14/97

Please return this form to Sheila Holloway as soon as possible.
City of Cookeville

Cost of Living Increase Form

Effective Date: June 30, 2002

Name: Hall, Eric

Job Title: Master Police Officer/Spec Oper

Hire Date: 13-Apr-97

Dept: 120

<table>
<thead>
<tr>
<th>Step / Salary FY Ending 2002</th>
<th>Step / Salary FY Beginning 2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade/Step</td>
<td>11.06</td>
</tr>
<tr>
<td>Salary</td>
<td>$32,096.90</td>
</tr>
<tr>
<td>Bi-Wkly Rate</td>
<td>$1,234.50</td>
</tr>
<tr>
<td>Hourly Rate</td>
<td>$15.431</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Grade/Step: 11.06</td>
</tr>
<tr>
<td></td>
<td>New Salary: $33,059.81</td>
</tr>
<tr>
<td></td>
<td>New Bi-Wkly Rate: $1,271.53</td>
</tr>
<tr>
<td></td>
<td>New Hourly Rate: $15.894</td>
</tr>
</tbody>
</table>

Approval:

City Manager or City Clerk/Finance Director Date

July 1, 2002
City of Cookeville
Personnel Grade / Step Increase Form

**Effective Date:** April 7, 2002

- **Status Change**
- **Step / Merit Increase**

<table>
<thead>
<tr>
<th>Name: Hall, Eric</th>
<th>Job Title: Master Police Officer/Spec</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSN#</td>
<td>Hire Date: 13-Apr-97</td>
</tr>
<tr>
<td>Dept: 120</td>
<td></td>
</tr>
</tbody>
</table>

| Grade/Step @ 7/1/00 | 11.05   | New Grade/Step: 11.06 |
| Salary @ 7/1/00     | $30,714.74 | New Salary: $32,096.90 |
| Bi-Weekly Rate @ 7/1/00 | $1,181.34 | New Bi-Weekly Rate: $1,234.50 |
| Hourly Rate @ 7/1/00: | $14.767 | New Hourly Rate: $15.431 |

Approval:

Employee: [Signature] 03/27/02

Director: [Signature] 3-27-02

City Manager or City Clerk/Finance Director: [Signature] 5-14-02
CITY OF COOKEVILLE  
STEP INCREASE CATCH-UP PAY  
POLICE DEPARTMENT  

<table>
<thead>
<tr>
<th>PAY END</th>
<th>EFFECTIVE DATE</th>
<th>NEW HRS RATE</th>
<th>REG. HOURS</th>
<th>REG. PAY</th>
<th>ON CALL DAYS</th>
<th>ON CALL PAY</th>
<th>ON CALL WORKED HOURS</th>
<th>ON CALL WORKED PAY</th>
<th>HOLIDAY DAYS</th>
<th>HOLIDAY PAY</th>
<th>NEW OT HOURS</th>
<th>NEW OT RATE</th>
<th>OT HOURS</th>
<th>OT PAY</th>
<th>CANINE/ CRT</th>
<th>TOTAL DUE</th>
<th>TOTAL PAID</th>
<th>AMOUNT DUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002-05-04</td>
<td>07-04-02</td>
<td>15.431</td>
<td>80</td>
<td>$1,234.48</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$23.15</td>
<td>11</td>
<td>$254.61</td>
<td>$30.00</td>
<td>$1,519.09</td>
<td>$1,455.01</td>
<td>$64.08</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2002-05-04</td>
<td>07-04-02</td>
<td>15.431</td>
<td>80</td>
<td>$1,234.48</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$23.15</td>
<td>11</td>
<td>$254.61</td>
<td>$30.00</td>
<td>$1,519.09</td>
<td>$1,455.01</td>
<td>$64.08</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DATE: 15-May-02  
EMPLOYEE #:       
EMPLOYEE NAME: ERIC HALL  
NEW GRADE & STEP: 11.06

# 117.20
City of Cookeville

Cost of Living Increase Form

Effective Date: July 1, 2001

Name: Hall, Eric

Job Title: Master Police Officer/Spec

Oper

SSN# [Redacted]

Hire Date: 13-Apr-97

Dept: 120

<table>
<thead>
<tr>
<th>Step / Salary @ June 30, '01</th>
<th>Step &amp; Salary @ July 1, '01</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade/Step</td>
<td>Grade/Step: 11.05</td>
</tr>
<tr>
<td>Salary</td>
<td>New Salary: $30,714.74</td>
</tr>
<tr>
<td>$30,112.49</td>
<td>New Bi-Wkly Rate: $1,181.34</td>
</tr>
<tr>
<td>Bi-Wkly Rate</td>
<td>New Hourly Rate: $14,767</td>
</tr>
<tr>
<td>$1,158.17</td>
<td></td>
</tr>
<tr>
<td>Hourly Rate</td>
<td></td>
</tr>
<tr>
<td>$14.477</td>
<td></td>
</tr>
</tbody>
</table>

Approval:

[Signature]

July 1, 2001

City Manager or City Clerk/Finance Director

Date
City of Cookeville
Personnel Grade / Step Increase Form

Effective Date: April 8, 2001

• Status Change  • Step / Merit Increase

Name: Hall, Eric  Job Title: Master Police Officer/Spec Oper
SSN#  Hire Date: 13-Apr-97
Dept: 120

Step / Salary @ July 1, ’00  New Step / Salary Annv Date

<table>
<thead>
<tr>
<th>Grade/Step @ 7/1/00</th>
<th>11.04</th>
<th>New Grade/Step: 11.05</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary @ 7/1/00</td>
<td>$28,815.78</td>
<td>New Salary: $30,112.49</td>
</tr>
<tr>
<td>Bi-Weekly Rate @ 7/1/00</td>
<td>$1,108.30</td>
<td>New Bi-Weekly Rate: $1,158.17</td>
</tr>
<tr>
<td>Hourly Rate @ 7/1/00:</td>
<td>$13.854</td>
<td>New Hourly Rate: $14.477</td>
</tr>
</tbody>
</table>

Approval:

Employee  04/03/01  Date

Director  4-3-01  Date

City Manager or City Clerk/Finance Director  4-18-2001  Date
CITY OF COOKEVILLE
Personnel Action Form

Effective Date 1-14-01

☑ Status Change

☐ New Employment

Name Hall Eric I.D. #42130-422
last first middle

Police Officer/CRT to Master Police Officer/CRT

Job Title SSN: ___________ - ___________ - ___________

Police Department Division Patrol

Account Number 42130-111 Check One: Hourly ☑ Salary ___

Position is: [ ] Exempt [x] Nonexempt

Type Increase: [ ] C.O.L. [ ] Step

CURRENT GRADE 10 CURRENT STEP 4 CURRENT SALARY 26,936.49

NEW GRADE 11 NEW STEP 4 NEW SALARY 28,815.78

Mark One: [x] Regular Full-Time [ ] Regular Part-Time 13.854/hr.

[ ] Temporary [ ] ___________

DOB 4-13-97 DOB 1-13-66 RACE W SEX M

Level of Formal Education

Approval:

Director 1-4-01 City Manager 1-5-01

1-23-97
City of Cookeville

Cost of Living Increase Form

Effective Date: July 2, 2000

- Change
- Cost of Living Increase

Name: Hall, Eric  
Job Title: Police Officer/CRT

SSN#  
Hire Date: 13-Apr-97

Dept: 120

<table>
<thead>
<tr>
<th>Step / Salary @ June 30, '00</th>
<th>Step &amp; Salary @ July 2, '00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade/Step</td>
<td>Grade/Step: 10.04</td>
</tr>
<tr>
<td>Salary</td>
<td>New Salary: $26,936.49</td>
</tr>
<tr>
<td>Bi-Wkly Rate</td>
<td>New Bi-Wkly Rate: $1,036.02</td>
</tr>
<tr>
<td>Hourly Rate</td>
<td>New Hourly Rate: $12.950</td>
</tr>
</tbody>
</table>

| Salary                      | $26,151.93                  |
| Bi-Wkly Rate                | $1,005.84                   |
| Hourly Rate                 | $12.573                     |

Approval:

Stephanie Miller  
City Manager or City Clerk/Finance Director  
July 2, 2000  
Date
City of Cookeville
Personnel Grade / Step Increase Form

Effective Date: April 9, 2000

• Status Change

Name: Hall, Eric
SSN# [redacted]
Dept: 120

• Step / Merit Increase

Job Title: Police Officer/CRT
Hire Date: 13-Apr-97

<table>
<thead>
<tr>
<th>Step / Salary @ July 1, '99</th>
<th>New Step / Salary Annv Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade/Step @ 7/1/98:</td>
<td>10.03</td>
</tr>
<tr>
<td>Salary @ 7/1/98:</td>
<td>$25,025.77</td>
</tr>
<tr>
<td>Bi-Weekly Rate @ 7/1/98:</td>
<td>$962.53</td>
</tr>
<tr>
<td>Hourly Rate @ 7/1/98:</td>
<td>$12.032</td>
</tr>
<tr>
<td>New Grade/Step:</td>
<td>10.04</td>
</tr>
<tr>
<td>New Salary:</td>
<td>$26,151.93</td>
</tr>
<tr>
<td>New Bi-Weekly Rate:</td>
<td>$1,005.84</td>
</tr>
<tr>
<td>New Hourly Rate:</td>
<td>$12.573</td>
</tr>
</tbody>
</table>

Approval:

[Signature]
Employee 03/24/00

[Signature]
Director 5/25/00

[Signature]
City Manager or City Clerk/Finance Director 4-10-2000
City of Cookeville
Personnel Grade / Step Increase Form

Effective Date: April 11, 1999

- Status Change
- Step / Merit Increase

Name: Hall, Eric
Job Title: Police Officer/CRT

SSN#

Hire Date: 13-Apr-97

Dept: 120

<table>
<thead>
<tr>
<th>Step / Salary @ July 1, '98</th>
<th>New Step / Salary Annv Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade/Step @ 7/1/98:</td>
<td>10.02</td>
</tr>
<tr>
<td>Salary @ 7/1/98:</td>
<td>$23,948.11</td>
</tr>
<tr>
<td>Bi-Weekly Rate @ 7/1/98:</td>
<td>$921.08</td>
</tr>
<tr>
<td>Hourly Rate @ 7/1/98:</td>
<td>$11.514</td>
</tr>
<tr>
<td>New Grade/Step:</td>
<td>10.03</td>
</tr>
<tr>
<td>New Salary:</td>
<td>$25,025.77</td>
</tr>
<tr>
<td>New Bi-Weekly Rate:</td>
<td>$962.53</td>
</tr>
<tr>
<td>New Hourly Rate:</td>
<td>$12.032</td>
</tr>
</tbody>
</table>

Approval:

Employee

Date

Director

City Manager or City Clerk/Finance Director

Date
CITY OF Cookeville
Personnel Action Form

Effective Date 9-6-98

☑ Status Change

☐ New Employment

Name Hall Eric L I.D. #304860384
    last first middle

Job Title Patrol Officer/CRT Member SSN:

Department Police Division Patrol

Account Number 42130-121 Check One: Hourly XX Salary

Position is: [ ] Exempt [X] Nonexempt

Type Increase: [ ] C.O.L. [ ] Step

CURRENT GRADE ______ CURRENT STEP ______ CURRENT SALARY ______

NEW GRADE ______ NEW STEP ______ NEW SALARY ______

Mark One: [ ] Regular Full-Time [ ] Regular Part-Time
[ ] Temporary [ ]

DOH 4-13-97 DOB 1-13-66 RACE W SEX M

Level of Formal Education

Approval:

[Signature] 9/11

Director Date City Manager Date
Effective Date: JULY 5, 1998

Cost of Living Increase

Name: Hall, Eric  
Job Title: Police Officer

SSN# [redacted]  
Hire Date: 13-Apr-97

Dept: 120

<table>
<thead>
<tr>
<th>Step / Salary @ June 30, '98</th>
<th>Step / Salary @ July 5, '98</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade/Step @ 6/30/98:</td>
<td>10.02</td>
</tr>
<tr>
<td>Salary @ 6/30/98:</td>
<td>23,478.54</td>
</tr>
<tr>
<td>Bi-Weekly Rate @ 6/30/98:</td>
<td>903.02</td>
</tr>
<tr>
<td>Hourly Rate @ 7/1/97:</td>
<td>11.288</td>
</tr>
</tbody>
</table>

Approval:

City Manager or City Clerk/Finance Director [signature]  
Date: 6-6-98
City of Cookeville
Personnel Grade / Step Increase Form

Effective Date: APRIL 12, 1998

- Status Change
- Step / Merit Increase

Name: **Hall, Eric**
Job Title: **Police Officer**

SSN#: [redacted]
Hire Date: **13-Apr-97**
Dept: **120**

<table>
<thead>
<tr>
<th>Step / Salary @ July 1, '97</th>
<th>New Step / Salary Annv Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade/Step @ 7/1/97:</td>
<td>New Grade/Step:</td>
</tr>
<tr>
<td></td>
<td>10.00</td>
</tr>
<tr>
<td>Salary @ 7/1/97:</td>
<td>New Salary:</td>
</tr>
<tr>
<td>$21,500.00</td>
<td>$22,367.50</td>
</tr>
<tr>
<td>Bi-Weekly Rate @ 7/1/97:</td>
<td>New Bi-Weekly Rate:</td>
</tr>
<tr>
<td>$826.92</td>
<td>$864.13</td>
</tr>
<tr>
<td>Hourly Rate @ 7/1/97:</td>
<td>New Hourly Rate:</td>
</tr>
<tr>
<td>$10.337</td>
<td>$10.802</td>
</tr>
</tbody>
</table>

Approval:

Employee: **Hall**
Date: **03/30/98**

Director: **William Aberson**
Date: **4-13-98**

City Manager or City Clerk/Finance Director: **[Signature]**
Date: **4/14**
8. Physical Fitness: Maintain a level of physical preparedness that will enable you to successfully perform required tasks. [8.5/9]

9. Equipment Use/Care: Proper maintenance and use of all issued and assigned equipment used in the performance of duties. [8.5/9]

10. Professional Ethics: Dealing in a manner which is above reproach in any situation. [8.5/9]

Strengths and developmental needs:

- Eric appears to be in good shape displaying coordination and endurance.
- Eric recognizes the need for proper service and maintenance of equipment and sees that his equipment is in proper working order.
- Eric has good morals and does not discriminate or show favoritism; he enforces the law equally and fairly.

<table>
<thead>
<tr>
<th>1. Adaptable</th>
<th>8.0</th>
<th>6. Job Knowledge</th>
<th>7.5</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Decision Making</td>
<td>7.5</td>
<td>7. Professional Attitude</td>
<td>7.5</td>
</tr>
<tr>
<td>3. Dependability</td>
<td>8.0</td>
<td>8. Physical Fitness</td>
<td>7.5</td>
</tr>
<tr>
<td>4. Appearance</td>
<td>8.0</td>
<td>9. Equipment Use/Care</td>
<td>8.0</td>
</tr>
<tr>
<td>5. Communication</td>
<td>7.5</td>
<td>10. Professional Ethics</td>
<td>8.0</td>
</tr>
</tbody>
</table>

AVERAGE SCORE: 7.75

PROBATIONARY EMPLOYEES ONLY

Please mark appropriate box:

- I recommend retaining this person as a permanent employee.
- I do not recommend retaining this person.

Plan for Improvement / Career Development: Officer Hall has done an outstanding job this past evaluation period. He has past law enforcement experience with Metro Nashville Police Department and I recommend he be compensated for his past experience.

Employee Comments:

My signature indicates only that I have seen this evaluation and does not necessarily mean that I am in agreement.

Employee Signature: John Hall Date: 04/03/98

I recommend one extra step. It Jerry Groom  [X] Satisfactory  [ ] Unsatisfactory
CITY OF COOKEVILLE
Personnel Action Form

Status Change

X Cost of Living Raise

<table>
<thead>
<tr>
<th>Name</th>
<th>HALL, ERIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>PICA #</td>
<td>POLICE OFFICER</td>
</tr>
</tbody>
</table>

| Hire Date     | 13-Apr-97              |

<table>
<thead>
<tr>
<th>Grade/Step</th>
<th>6/30/97 10.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary</td>
<td>6/30/97 20,950.20</td>
</tr>
<tr>
<td>Bi-Weekly Rate</td>
<td>6/30/97 805.78</td>
</tr>
<tr>
<td>Hourly Rate</td>
<td>6/30/97 10.072</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Grade/Step</th>
<th>7/1/97 10.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary</td>
<td>7/1/97 21,500.00</td>
</tr>
<tr>
<td>Bi-Weekly Rate</td>
<td>7/1/97 826.92</td>
</tr>
<tr>
<td>Hourly Rate</td>
<td>7/1/97 10.337</td>
</tr>
<tr>
<td>Overtime Rate</td>
<td>7/1/97 15.505</td>
</tr>
</tbody>
</table>

Approval:

Employee

Date

Director

Date

City Manager

Date
CITY OF COOKEVILLE
Personnel Action Form

Effective Date 4-13-97

☐ Status Change
☐ New Employment

Name Hall Eric Lee I.D. # __________
last first middle

Job Title Police Officer SSN __________

Department Police Division Patrol

Account Number 42130-121 Check One: Hourly x Salary

Position is: [ ] Exempt [ x] Nonexempt

Type Increase: [ ] C.O.L. [ ] Step

CURRENT GRADE 10 CURRENT STEP 0 CURRENT SALARY 20,950.20

NEW GRADE ___ NEW STEP ___ NEW SALARY ___

Mark One: [ ] Regular Full-Time [ ] Regular Part-Time
[ ] Temporary [ ]

DOH 4-13-97 DOB 6-13-66 RACE W SEX M

Level of Formal Education AAS, Conservation Law Enforcement

Approval:

Director Date City Manager Date

4-11-97 4-7-97
### Employment History

<table>
<thead>
<tr>
<th>Date</th>
<th>Position</th>
<th>Dept.</th>
<th>Pay Rate</th>
<th>Grade</th>
<th>Step</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>4-13-97</td>
<td>Police Officer</td>
<td>Police</td>
<td>80578 BW</td>
<td>10-6</td>
<td>New Hire</td>
<td></td>
</tr>
<tr>
<td>7-1-97</td>
<td></td>
<td></td>
<td>82692 BW</td>
<td></td>
<td>COL</td>
<td></td>
</tr>
<tr>
<td>4-12-98</td>
<td></td>
<td></td>
<td>90302 BW</td>
<td>10-2</td>
<td>2-Step Increase</td>
<td></td>
</tr>
<tr>
<td>7-5-98</td>
<td></td>
<td></td>
<td>92108 BW</td>
<td></td>
<td>COL</td>
<td></td>
</tr>
<tr>
<td>9-6-98</td>
<td></td>
<td></td>
<td>2300 BW</td>
<td></td>
<td>Added CRT Supplement</td>
<td></td>
</tr>
<tr>
<td>4-11-99</td>
<td>CRT</td>
<td></td>
<td>96253 BW</td>
<td>10-3</td>
<td>Step Increase</td>
<td></td>
</tr>
<tr>
<td>4-9-00</td>
<td></td>
<td></td>
<td>1257 W.</td>
<td>10-4</td>
<td>Step Increase</td>
<td></td>
</tr>
<tr>
<td>7-2-00</td>
<td></td>
<td></td>
<td>1295 BW</td>
<td></td>
<td>COL</td>
<td></td>
</tr>
<tr>
<td>11/10/01</td>
<td>Master Police Officer</td>
<td></td>
<td>1385 BW</td>
<td>11-4</td>
<td>Status Change</td>
<td></td>
</tr>
<tr>
<td>4/14/01</td>
<td></td>
<td></td>
<td>1448</td>
<td>11-5</td>
<td>Step Increase</td>
<td></td>
</tr>
<tr>
<td>7/14/01</td>
<td></td>
<td></td>
<td>1477</td>
<td></td>
<td>COL</td>
<td></td>
</tr>
<tr>
<td>4/7/02</td>
<td></td>
<td></td>
<td>1543</td>
<td>11-6</td>
<td>Step Increase</td>
<td></td>
</tr>
<tr>
<td>10/30/02</td>
<td></td>
<td></td>
<td>1589</td>
<td></td>
<td>COL Increase</td>
<td></td>
</tr>
</tbody>
</table>
**CITY OF COOKEVILLE**

**PERSONNEL REQUISITION**

<table>
<thead>
<tr>
<th>Department</th>
<th>Police</th>
<th>Date</th>
<th>12-30-96</th>
</tr>
</thead>
<tbody>
<tr>
<td>Division</td>
<td>Patrol</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Requesting Personnel for a: [ ] New Position [x] Replacement

<table>
<thead>
<tr>
<th>Position Title</th>
<th>Police Officer</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Position Grade</td>
<td>10</td>
<td>Position Step</td>
<td>0</td>
</tr>
</tbody>
</table>

Starting Salary $ 20,950.20

Requested Starting Date: 4-15-97

Position is:

- [x] Regular Full-Time
- [ ] Regular Part-Time
- [ ] Temporary
- [ ] Emergency

Estimated # of Hours Per Week

Estimated Length of Assignment

Recommended Forms of Advertisement:

- [x] Employee Bulletin Boards
- [x] Local Newspapers
- [x] Nashville Tennessean/Banner
- [ ] Other

12-30-96

Director’s Signature

Date

4 TOTAL POSITIONS

2/17/97

Attach current job description for the position and submit to the Director of Human Resources a minimum of 21 working days prior to the requested starting date.

Approved for Advertising and Hiring:

14/97

City Manager

Date
City of Cookeville
Critical Response Agreement

Date: 04-17-97

Name: Hall, Eric Lee

Cookeville Police Department
Patrol Division

I understand that the Patrol Officer position I am accepting with the Cookeville Police Department is a Critical Response Position, and I will be required to report to work within thirty minutes during emergency situations when requested to do so by my supervisor, director or other City employee acting in an official capacity.

I agree to maintain my place of residence within thirty minutes of the Cookeville Police Department. I understand that I have six (6) months to move my place of residence if I am not living within the thirty-minute limit at the time of my employment.

I understand that this agreement is not an employment contract and does not obligate me or the City to any specific term of employment. I also understand that this agreement does in no way authorize me to travel at speeds above the posted speed limit when I am requested to report to work during an emergency situation.

Employee's Signature

Date

Director's Signature

Date
COOKEVILLE POLICE DEPARTMENT

CHIEF WILLIAM A. BENSON
P.O. BOX 849, 10 EAST BROAD STREET
COOKEVILLE, TN 38503-0849
615-526-2125
FAX 528-9368

STATE OF TENNESSEE
COUNTY OF PUTNAM
CITY OF COOKEVILLE

Personally appeared before me, Sheila Holloway, the undersigned, Eric Lee Hall, who states that "I solemnly swear that I will support the Constitution and will obey the laws of the United States and of the State of Tennessee, that I will, in all respects, observe the provisions of the charter and ordinances of the City of Cookeville, and will faithfully discharge the duties of a police officer."

Eric Lee Hall

Chief William A. Benson

Subscribed and sworn to before me this 14th day of April, 1997.

Sheila Holloway
Notary Public

My commission expires the 21st day of March, 2000.
OFFICER:  Eric Hall

AGENCY:  Cookeville Police Department

TO THE HEAD OF LAW ENFORCEMENT AGENCY

This form should be presented to the examining physician for the purpose of police officer certification. Upon completion of physical evaluation, the examining physician should sign the appropriate statement and this form should be returned to the law enforcement agency. This form should then be attached to the Application for Certification — Police Officer, and should be forwarded to the POST Commission.

TO THE EXAMINING PHYSICIAN

Pursuant to Tennessee Code Annotated, Section 38-8-106, applicants for police certification must have passed a physical examination by a licensed physician. Upon completion of evaluation, please sign the appropriate statement and return this document to the law enforcement agency.

CONFIRMATION STATEMENT OF ATTENDING PHYSICIAN

I have performed a medical examination and find that this officer is:

☐ PHYSICALLY FIT — This person is physically fit within a reasonable degree of medical certainty.

☐ NOT PHYSICALLY FIT — This person is not physically fit for the following reasons:


Comment:

________________________________________

______________________________
(Signature of Licensed Physician)  

500 Old KY Rd

______________________________
(Street Address)

3-18-92

(Date)

________________________________________

(telephone)  

Cookeville, TN 38501

(City/State)
Purdue University
Junior College

Be It Hereby Certified that

Eric L. Hall

having completed the Course of Study as prescribed by Purdue University and having complied with all other requirements for graduation, is granted therefore upon recommendation of the faculty the title of

Associate in Science

In Testimony Whereof, this diploma is given, attested with the seal of the University and the signatures of its duly authorized officers at Purdue, Indiana, the nineteenth day of December, 1987.

[Signatures]

Joseph H. Armstrong
President

John P. Schelling
Dean of Faculty

Jerry W. Stenger
Registrar
Certificate of Commendation

METROPOLITAN POLICE DEPARTMENT
Nashville-Davidson County, Tennessee

Is Awarded to

Eric Hall

in recognition of commendable service rendered the citizens of Nashville and Davidson County, Tennessee

HONORABLE MAYOR

CHIEF OF POLICE

March 19, 1997
Queenston High School

John A. Bonn
Principal

Charles A. Smith
Superintendent

Judith S. Grant
President

Dear Mr. Grant,

I am writing to officially announce the graduation of [student's name] from John A. Bonn High School on [graduation date].

[Signature]

[Date]

John A. Bonn
Principal
CONFIRMATION OF PSYCHOLOGICAL EVALUATION

NAME OF APPLICANT: Eric Hall

REFERRING AGENCY: Cookeville Police Dept.

TO THE HEAD OF LAW ENFORCEMENT AGENCY

This form should be presented to the psychologist/psychiatrist providing psychological evaluation for the purpose of police officer certification. Upon completion of psychological evaluation, the examining professional should check the appropriate confirmation statement and sign this form in the space provided. This form should then be forwarded to the law enforcement agency. This form should then be attached to the Application for Certification — Police Officer, and should be forwarded to the POST Commission. A copy of this report and the confidential results of the evaluation should be kept in the agency's file. DO NOT SEND CONFIDENTIAL EVALUATION TO THE POST COMMISSION.

TO THE EXAMINING PSYCHOLOGIST/PSYCHIATRIST

Pursuant to Tennessee Code Annotated, Section 38-8-106, applicants for police certification must be free of all apparent mental disorders as described in the current edition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association. Applicants must be certified as meeting these criteria by a qualified professional in the psychiatric or psychological fields. Upon completion of evaluation, please sign the appropriate statement and return this document to the law enforcement agency.

CONFIRMATION STATEMENT BY THE EXAMINING PROFESSIONAL

I have evaluated tests administered to the referenced individual and find that this officer is:

☑ QUALIFIED ☐ NOT QUALIFIED

to be certified under the provisions of Tennessee Code Annotated, Section 38-80196. The results of my evaluation are being forwarded to the employing agency.

(Signature of Examining Professional)

377-D Short Street

(Street Address)

3-18-97 (615) 520-1115

(Date) (Telephone)

Cookeville, TN 38501

(City/State)
To Whom it may Concern,

I wanted to take the opportunity to tell you how one of your police officers went above and beyond the call of duty.

I am a student at Tennessee Tech. I live in Dayton, Tennessee and travel the 180 miles round trip 3 days a week to get my Masters. The other day, because I was trying to make it to the next exit, I ran out of gas. I was feeling very stupid as I started trekking along Hwy 111 to find the nearest gas station. I hadn't been walking far when Eric Hall pulled up in his pick-up truck. He was so nice and took me to the nearest gas station, borrowed a gas can from the attendant, and took me back to my truck. He never once made me feel stupid for running out of gas and definitely went above the call of duty. I just wanted to let you know how much I appreciated him and his kindness and hope you will pass along my gratitude! Thank you Eric Hall!

Kristin Hudlow

Sincerely:

Good Job!

This is what we needed our police officers for.

Good luck!
February 19, 2001

Dear Officer McWhorter,

You may not remember me so I will start this with referring to where and how I met you. I was leaving Plateau Mental Health Center on January 2, 2001, in a little red car. You had been called out about someone being combative there. You mistook me for that person and one thing led to another and I told you that I was depressed and suicidal not combative which in turn required you to take me into custody. Well at some point prior to you taking me to the hospital you asked me if I was angry and I replied yes, as I felt like it was a heck of a place to end up handcuffed in the back of a police car when one finally reaches out for help. Well while I was sitting back there I decided that the worst that could happen was that I would die and at that time it didn’t matter to me if I did so be it. I remember your searching my purse and seeming a bit surprised that it was clean as you no doubt suspected that I was into drugs. You had a justifiable right to suspect this because of the company I had been in shortly prior to that, and I am just proud to say that is not my problem.

I will not go into great detail of what my problem is that is a book in itself. To make it short and to the point I was an abused child, and abused adolescent, and an abused adult, many times over. We battered people seem to send out some kind of signal that we are easy to control and are known for keeping our mouths shut about it. We are easily conned I guess is the way of it. Anyway, my experience with law enforcement over the years of all of this has not been positive. I have seen enough to know that our system can be and often is very corrupt, and I had over the years developed a trust none of them attitude as I have no way of knowing who is and who isn’t corrupt and really feel safer not knowing in many ways sometimes what you don’t know won’t hurt you and sometimes it will. That is another story. Anyway if you will recall it was very cold out and the roads were covered in snow and I wanted a cigarette very badly. Well you had been talking to your partner or I suppose actually other fellow officers who was inside Plateau and by now had determined that I was not combative (it generally takes a considerable amount of abuse to get a battered woman to be combative and you had not been abusive just doing your job) and at this point asked me if you asked me to would I go voluntarily with you to the hospital. MY reply was that I wanted a cigarette, and you promised me that when we got to the hospital you would let me have one. Then I requested that you park my car there at Plateau so that I would not have towing and impound fees to also deal with and this your friend did for me. So the point of all of this is that I wanted to say thank you to the both of you, unfortunately I don’t know what his name was as it was you that was handling most things and I remembered reading your name tag as you were handcuffing me. Well a lot has happened since then and most all of it for the good. So I wanted to thank you in hopes that in the future you will be as considerate to others as you were to me and know that it does in fact make a difference. The whole situation could have been entirely different had you been a jerk. So thank you for not hurting me when you put the handcuffs on, thank you for asking me if I would go willingly and at least letting me feel like I had a little bit of control over the situation, and thank you for keeping your promise to me and letting me
have that cigarette when we did get to the hospital, and thank you parking my car where I could retrieve it cost free, and thank you for your parting words of maybe someday I can help others, it is my desire to be able to do so. Having gone to the hospital speeded up what is usually a lengthy process and has helped me to get the help I need faster. Unfortunately women who have undergone the types of abuse I have are often miss diagnosed and very often very miss judged. Any way between you, your fellow officer, and the doctor at the hospital you returned to me a bit of faith in a system who has for so long treated me so bad. I have a daughter in the navy and it has really been hard for me to accept the fact that she is part of a system I had grown to distrust so, and it has been a major inner conflict as I am actually very patriotic. Thank you for helping to restore some of that trust and may you continue to do so in your chosen profession and may God keep you safe from any and all harm that may come your way in your chosen profession.

With much appreciation,

[Signature]

Naomi Woods
Date: October 22, 2001

To: Whom it may concern

Re: Family Protection Unit
   Cookeville Police Department
   Sergeant Yvette Demming
   Officer Eric Hall

This letter is in regards to the services the Family Protection Unit provides our office when dealing with domestic violence cases in Court. Sergeant Yvette Demming and Officer Eric Hall do an excellent job in helping gather all relevant information with regards to each case that comes before us. After retrieving this information, Officer Hall and Sergeant Demming are able to give us a quick concise summary of the facts involved as well as give us a recommendation on whether the defendant qualifies for possible diversion from prosecution.

If the defendant is found to be a possible candidate and the victim does not object, it is the usual practice of the Court to continue the case for a period of eight months to allow the defendant to go through the Skills to Avoid Violence class. This class offers defendants counseling to help them manage their anger and find constructive outlets. If the defendant completes the SAV program successfully and has paid off all cost associated with the Court, our office will dismiss the charge against the defendant at the end of the eight month period.

With as many cases that our office handles, it is of extreme benefit that the Family Protecting Unit continue to play such a vital role in the prosecution of domestic violence oriented cases.

Sincerely,

Gary S. McKenzie
Assistant District Attorney
13th Judicial District
Cookeville, TN 38501
December 8, 2001

Dear Chief Terry,

I just had to write the Cookeville Police Department and commend you on the outstanding officers, as well as the outstanding personnel you have on your force. Recently, I was the victim of a hit and run incident in May of 2001 on Carolina Ave. Officer Eric Hall responded to the accident. He was very professional and kind as he took all the appropriate information down about the wreck. Officer Hall promptly put together a photo line up and came to my place of business as not to inconvenience me furthermore. I stated that I was adament at getting this gentleman off the roadways. Not only had he left the scene at a high rate of speed, but children and Tech. students ride their bikes down that road and he could've hit one of them. I know he wouldn't have checked on them either (plus, the bum made me late for work!!).

As weeks and finally months went by, I assumed the man that left the scene of the accident wouldn't be found. Seven months later, Officer Hall called and informed me of a court date. He noticed that that the case had been dismissed at a prior court date and stated "Ms. Scruggs would not have failed to appear for her case." He was very observant and remembered my plea to catch the culprit, plus he was right. I never received notice of that first court date. He left messages at my home and my work to make sure I knew of this second court date.

When I showed up at court, I was very dismayed with how the defense attorney treated me like I was the criminal because I wanted to file charges against this man. Little did he know, he made it worse for his client. His reaction made me want to proceed. Officer Hall persuaded my case and helped explain my options. I was ready to go to the grand jury if I had to. With the help of Officer Hall, the man pled guilty of the charges!

As I sat through court that day, I listened to Officer Hall's other cases. I realized how minor my little "fender bender" had been compared to chasing down an armed man who had held up a business woman and robbed her. I was so appreciative of how serious Officer Hall had taken my case. He treated me with such respect and helped me so much to proceed with my charges.

The police force sees people everyday just like the man that was involved in my wreck. I am sure it is hard not to lose faith in people. You have some wonderful officers. I often commend them, but Officer Hall is truly special. Through his professionalism, citizens can tell just how much he cares about this community and protecting the good people in it. I thank him for his respect, his kind words, and for protecting us. I only wish there were 100 more like Officer Hall. It's an honor to live in a community where people like him are the ones protecting it!

I know it seems like all you hear are complaints. This is one positive experience that I wanted to pass on to you. It was well worth my time to do it. It's the least I can do for a job well done. Now I feel that the system does work if you stand your ground and have a good officer there to back you up. Thank you so much for providing us with these great officers and dispatchers!

Sincerely,

Sheila Scruggs
"Stevens & Scruggs in the Morning"
Kicks 106.9FM
Memorandum

To: Officer Eric Hall
From: Chief William A. Benson
Date: January 23, 1998
Re: Commendation

We received a letter from Ms. Eula Williams of 201 South Walnut Avenue praising your assistance with her neighbor who has Alzheimer’s Disease. She very much appreciated your help and your nice manner.

I want to take this opportunity to express my gratitude for a job well done. Officers like you are an asset to our department. Keep up the good work!

A copy of Ms. Williams’ letter is attached, and a copy of this memo will be placed in your personnel file.
Gentlemen,

A few weeks ago I called the police station asking for help. I have a neighbor who has Alzheimer's, and we the neighbors try to watch after and help her any way we can. But the night when it became dark we couldn't get her to go into the house. You the police were the only ones I could think of who might help us. The dispatcher sent a very nice officer who talked with her and we had no more trouble getting her to go in for several days. I just wanted to say it's good to know we have such a fine police force we can depend on when we need help. Please thank Officer Eric Hall for being so nice when we were in need of help.

Thank you
Eula Williams
MEMORANDUM

TO: Capt. Cordell Elrod

FROM: Sgt. Mark Maxwell

DATE: June 17, 1997

SUBJECT: Probationary Officer Eric Hall

Officer Eric Hall has been in the Field Training and Evaluation Program for six weeks. He has progressed exceptionally well according to his Field Training Officers. Therefore, Patrol Officer Mark Loftis who trained Officer Hall in Step 1 has made a recommendation to advance Officer Hall to Solo Performance, since he is a certified Officer and has experience in Police work prior to being employed with this Department. I have also spoken with Officer's Demming and Sealy who are Officer Hall's present F.T.O.'s and they concur with Officer Loftis's recommendation.

I have reviewed the F.T.O. file on Officer Hall and it consistently reflects above average scores in all categories evaluated and is consistent with the F.T.O.'s recommendation.

Therefore based on the F.T.O.'s recommendation I am recommending Officer Hall be accelerated to Solo Performance and permanently assigned to a shift for the remainder of his probationary period.

Copies: Chief William A. Benson
F.T.O. Committee

Appraised: Discussed with Capt. Elrod
and all Hall goes to work alone
this week.

6-17-97