

Richard L. Tettamant,  
Administrator

Brian F. Blake,  
Assistant Administrator

Donald C. Rohan,  
Assistant Administrator



D A L L A S  
**POLICE & FIRE**  
PENSION SYSTEM



**Board of Trustees**

Gerald Brown, Chairman  
Gary W. Edge  
Donald W. Hill  
John M. Mays  
Rector McCollum  
Steven G. Shaw  
Maxine Thornton-Reese  
George J. Tomasovic  
Steven H. Umlor  
Richard H. Wachsman

**VIA FACSIMILE and US MAIL**  
**972.931.0176**

October 10, 2003

Fraud Investigations  
Dallas Public Fraud Prevention Services  
POB 455  
Addison, TX 75001-0455

RE: Open Records Request dated September 20, 2003  
**0301-030**

To Whom It May Concern:

By letter dated October 8, 2003, we responded to your September 20, 2003, request under the Texas Public Records Act. Documents responsive to item #3 of the request were not available at that time

The information you requested in item #3 for fiscal years 2000 through 2003 is now provided in the documents attached.

Sincerely,

A handwritten signature in black ink, appearing to read 'Donald C. Rohan'.

Don Rohan  
Assistant Administrator-Operations

DR:ct

Enclosures (3)

cc: Mr. Teodoro J. Benavides  
Ms. Kimberly Tolbert  
Mr. Gary Lawson

Richard L. Tettamant,  
Administrator

Kathryn A. Cox,  
Assistant Administrator

Fredric D. Richmond,  
Assistant Administrator



D A L L A S  
POLICE & FIRE  
PENSION SYSTEM



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Maxine Thornton-Reese  
George J. Tomasovic  
Dwight Walker

April 19, 2000

Mr. Richard Tettamant  
Administrator  
Dallas Police & Fire Pension System  
2777 Stemmons Freeway, Suite 825  
Dallas, TX 75207

Dear Richard:

I have accepted a position [REDACTED]  
effective May 9, 2000. I therefore tender my resignation as Assistant Administrator -  
Investments effective May 8, 2000. [REDACTED]  
[REDACTED]

Sincerely,

  
Fredric D. Richmond, CFA

APRIL 07, 2000

CITY OF DALLAS  
EMPLOYEE DATA STATEMENT  
Civilian Employee

Name: FREDRIC D. RICHMOND

EMPLOYMENT DATES:

Original Appointment: ..... 11/14/94

Position Title: ASST P&F PENS ADM-IN

# TERMINATION AUTHORIZATION

PERSONNEL CIVIL SERVICE COPY GREEN—FINANCE CITY CONTROLLER COPY CANARY—RETIREMENT COPY PINK—DEPARTMENT COPY GOLD—COUNCIL COPY

Effective Date - First day employee did not work  
Job abandonment - first day after shown three work  
days X on payroll

05/08/2000

☐ CLASSIFIED

☐ UNIFORM  
CLASSIFIED

☒ ADMINISTRATIVE  
UNCLASSIFIED

☐ LABOR

☐ R - PERMANENT  
FULL TIME

☐ T - PERMANENT  
PART TIME

☐ J - TEMPORARY  
FULL TIME

☐ X - TEMPORARY  
PART TIME

PAYROLL NO.

ORG. NO.

EMPLOYEE NO.

NAME AS SHOWN ON THE PAYROLL AND LEAVE REGISTER

PI NUMBER

Fredric D. Richmond

## TYPE OF TERMINATION

☐ 1 MILITARY DUTY LEAVE

☐ 2 REDUCTION IN FORCE

☐ 3 RESIGNATION

☐ 4 DISMISSAL

☐ 5 RETIREMENT

☐ 6 DISABILITY ☐ NON-JOB ☐ JOB

☐ 7 DEATH ☐ NON-JOB ☐ JOB

☐ 8 DID NOT COMPLETE PROBATION

☐ 9 END OF ASSIGNMENT

WORKING ADDRESS: IF ONLY TWO LINES ARE REQUIRED USE TWO TOP LINES.

UNIFORM POLICE AND FIRE ONLY

COMP PAY \_\_\_\_\_ DAYS \$ \_\_\_\_\_

COMP PAY \_\_\_\_\_ DAYS \$ \_\_\_\_\_

TOL ADJUSTMENTS (EXPLAIN) \$ \_\_\_\_\_

COMP PAY (THIS PAY PERIOD) \$ \_\_\_\_\_

COMP PAY (FUTURE PAY PERIODS) \$ \_\_\_\_\_

ZIP CODE

COMMENTS

LAST DAY TO WORK 05/08/2000

SUPERVISOR

DATE

CITY MANAGER

DATE

DEPARTMENT

DATE

PERSONNEL

DATE

CIVIL SERVICE

DATE

FINANCE/CITY CONTROLLER

DATE

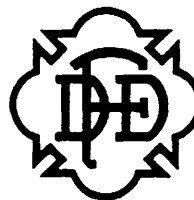
Richard L. Tettamant,  
Administrator

Kathryn A. Cox,  
Assistant Administrator

Fredric D. Richmond,  
Assistant Administrator



**D A L L A S**  
**POLICE & FIRE**  
**PENSION SYSTEM**



**Board of Trustees**

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Donald W. Hill  
John P. Loza  
John Mays  
Mary Poss  
Steven G. Shaw  
Maxine Thornton-Reese  
George J. Tomasovic  
Dwight Walker

May 31, 2000

Richard Tettamant, Administrator  
Dallas Police and Fire Pension System  
2777 Stemmons Freeway, Suite 825  
Dallas, TX 75207

**RE: Resignation - June 17, 2000**

Dear Mr. Tettamant:

I have accepted a position [REDACTED] I therefore tender my resignation as Assistant Administrator-Benefits. My last day with Dallas Police and Fire Pension System will be June 16, 2000. [REDACTED]

Sincerely,

A handwritten signature in cursive script that reads 'Kathryn A. Cox'.

Kathryn A. Cox  
Assistant Administrator-Benefits

c File/ [unclear] of resignation KC.doc

APRIL 07, 2000

CITY OF DALLAS  
EMPLOYEE DATA STATEMENT  
Civilian Employee

Name: KATHRYN A COX

EMPLOYMENT DATES:

Original Appointment: ..... 09/23/77

Position Title: ASST P&F PEN ADM-BEN

# TERMINATION AUTHORIZATION

PERSONNEL CIVIL SERVICE COPY GREEN—FINANCE CITY CONTROLLER COPY CANARY—RETIREMENT COPY PINK—DEPARTMENT COPY GOLD—DIVISION COPY

Effective Date - First day employee did not work. Job abandonment - first day after shown three work days X on payroll.	06/17/00
---	----------

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> CLASSIFIED                 | <input type="checkbox"/> UNIFORM<br>CLASSIFIED      | <input checked="" type="checkbox"/> ADMINISTRATIVE<br>UNCLASSIFIED | <input type="checkbox"/> LABOR                      |
| <input type="checkbox"/> R - PERMANENT<br>FULL TIME | <input type="checkbox"/> T - PERMANENT<br>PART TIME | <input type="checkbox"/> J - TEMPORARY<br>FULL TIME                | <input type="checkbox"/> X - TEMPORARY<br>PART TIME |

PAYROLL NO.	ORG. NO.	EMPLOYEE NO.	NAME AS SHOWN ON THE PAYROLL AND LEAVE REGISTER	P.I. NUMBER
[REDACTED]	[REDACTED]	[REDACTED]	Kathryn A. Cox	[REDACTED]

## TYPE OF TERMINATION

- ☐ 1 MILITARY DUTY LEAVE
- ☐ 2 REDUCTION IN FORCE
- ☒ 3 RESIGNATION
- ☐ 4 DISMISSAL
- ☐ 5 RETIREMENT
- ☐ 6 DISABILITY ☐ NON-JOB ☐ JOB
- ☐ 7 DEATH ☐ NON-JOB ☐ JOB
- ☐ 8 DID NOT COMPLETE PROBATION
- ☐ 9 END OF ASSIGNMENT

[REDACTED]

FORWARDING ADDRESS: IF ONLY TWO LINES ARE REQUIRED USE TWO TOP LINES.

[REDACTED]

[REDACTED]

[REDACTED]

ZIP CODE [REDACTED]

UNIFORM POLICE AND FIRE ONLY

COMP PAY _____ DAYS	\$ _____
COMP PAY <u>1</u> DAYS	\$ _____
TOT ADJUSTMENTS (EXPLAIN)	\$ _____
COMP PAY (THIS PAY PERIOD)	\$ _____
COMP PAY (FUTURE PAY PERIODS)	\$ _____

COMMENTS

LAST DAY TO WORK June 16, 2000 DAYS OFF S/S

SUPERVISOR	DATE	CITY MANAGER	DATE
DEPARTMENT <i>Richard L Tetthamant</i>	DATE <i>6/9/2000</i>	PERSONNEL	DATE
CIVIL SERVICE	DATE	FINANCE/CITY CONTROLLER	DATE <i>[Signature]</i>

Dallas Police & Fire Pension System Employee

**TERMINATION AUTHORIZATION**

PERSONNEL/CIVIL SERVICE COPY GREEN—FINANCE/CITY CONTROLLER COPY CANARY—RETIREMENT COPY PINK—DEPARTMENT COPY GOLD—DIVISION COPY

Effective Date - First day employee did not work.  
Job abandonment - first day after shown three work  
days X on payroll.

March 5, 2002

☐ CLASSIFIED

☐ UNIFORM  
CLASSIFIED

☐ ADMINISTRATIVE  
UNCLASSIFIED

☐ LABOR

☒ R - PERMANENT  
FULL TIME

☐ T - PERMANENT  
PART TIME

☐ J - TEMPORARY  
FULL TIME

☐ X - TEMPORARY  
PART TIME

PAYROLL NO.	ORG. NO.	EMPLOYEE NO.	NAME AS SHOWN ON THE PAYROLL AND LEAVE REGISTER	P.T. NUMBER
			Tara D. Anderson	

**TYPE OF TERMINATION**

**REASON**

**OVERALL PERFORMANCE**

☐ 1 MILITARY DUTY LEAVE

☐ 1 LEAVING THE CITY

☐ 2 REDUCTION IN FORCE

☐ 2 ANOTHER POSITION

☐ 3 RESIGNATION

☐ 3 SCHOOL

☒ 4 DISMISSAL

☐ 4 ATTENDANCE AND PUNCTUALITY

☐ 5 RETIREMENT

☐ 5 HEALTH

☐ 6 DISABILITY ☐ NON-JOB ☐ JOB

☒ 6 DISCIPLINARY ACTION

☐ 7 DEATH ☐ NON-JOB ☐ JOB

☐ 7 PERFORMANCE

☐ DID NOT COMPLETE PROBATION

☐ 8 DISSATISFIED WITH JOB

☐ END OF ASSIGNMENT

☐ 9 JOB ABANDONMENT

☐ 10 OTHER-SEE COMMENTS

**RECOMMENDATION**

ATTACH LATEST PERFORMANCE  
EVALUATION/MEMO TO/FROM  
EMPLOYEE AND SUPPORTING  
DOCUMENTATION

FORWARDING ADDRESS: IF ONLY TWO LINES ARE REQUIRED USE TWO TOP LINES.

**UNIFORM POLICE AND FIRE ONLY**

COMP PAY \_\_\_\_\_ DAYS \$ \_\_\_\_\_

COMP PAY \_\_\_\_\_ DAYS \$ \_\_\_\_\_

TOL ADJUSTMENTS (EXPLAIN) \$ \_\_\_\_\_

COMP PAY (THIS PAY PERIOD) \$ \_\_\_\_\_

COMP PAY (FUTURE PAY PERIODS) \$ \_\_\_\_\_

COMMENTS

LAST DAY TO WORK March 4, 2002 DAYS OFF \_\_\_\_\_

SUPERVISOR <i>Donald O'Neil</i>	DATE <i>3-19-02</i>	CITY MANAGER	DATE
DEPARTMENT <i>Killam Tettamat</i>	DATE <i>3-19-2002</i>	PERSONNEL	DATE
SERVICE	DATE	FINANCE/CITY CONTROLLER	DATE

CITY OF DALLAS  
EMPLOYEE DATA STATEMENT  
Civilian Employee

Name: TARA D ANDERSON

Payroll Number: [REDACTED]

Social Security Number: [REDACTED]

Org Number: [REDACTED]

EMPLOYMENT DATES:

Original Appointment: ..... 07/17/95

PAY ELEMENTS:

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Position Title: CLERK III

[REDACTED]

[REDACTED]

[REDACTED]

## A. EMPLOYEE INFORMATION

Employee Name: TARA D. ANDERSON	[REDACTED]
[REDACTED]	PI #:
Position Title: CLERK 76	Class Code:
Department/Division: POLICE & FIRE PENSION	[REDACTED]
Fiscal Year: 2000 - 2001	[REDACTED]

## B. JOB PERFORMANCE & RESULTS

Employee: Complete the goals and objectives you are expected to accomplish. Explain how you can measure whether you have accomplished it or not.

Supervisor: Review and evaluate employee performance with respect to job results.

[REDACTED]	Measures & Expectations: [REDACTED] [REDACTED] [REDACTED] m.
[REDACTED]	[REDACTED]
Goal/Objective 2: [REDACTED]	Measures & Expectations: [REDACTED] ff [REDACTED] s.
[REDACTED]	[REDACTED]

## APPOINTMENT AUTHORIZATION

WHITE - PERSONNEL CIVIL SERVICE COPY		BLUE - FINANCE CITY CONTROLLER COPY		GREEN - RETIREMENT COPY		CANARY - DEPARTMENT COPY		PINK - DIVISION COPY		GOLD - EMPLOYEE COPY	
<input checked="" type="checkbox"/> APPOINTMENT		<input type="checkbox"/> REAPPOINTMENT		<input type="checkbox"/> REINSTATEMENT		SERVICE CREDIT DATE		EFFECTIVE DATE March 8, 2002			
<input type="checkbox"/> CLASSIFIED		<input type="checkbox"/> UNIFORM CLASSIFIED		<input type="checkbox"/> ADMINISTRATIVE UNCLASSIFIED		<input type="checkbox"/> LABOR					
PAYROLL NO.		ORG. NO.		NAME Jannette D. Washington							
SOCIAL SECURITY NO.		BIRTH DATE		PI NO.		POS. CLASS		CLASS TITLE Administrative Clerk		ED. LEVEL	
GRADE-STEP		EMPL. CODE		PENSION CODE		RACE		SEX 1		2	
TAX STATUS		<input type="checkbox"/> SINGLE 1		<input type="checkbox"/> MARRIED 2		<input type="checkbox"/> MARRIED (CLAIMING SINGLE) 3		NUMBER OF EXEMPTIONS			
<input type="checkbox"/> NOT TAXED		ADDITIONAL WITHHOLDING EACH PAY PERIOD \$									
PAYROLL CODE											
DRIVER TYPE		CHECK ONE: <input type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT									
ADDRESS											
ADDRESS		PHONE NO.									
ADDRESS		ZIP CODE									
PAY PERIOD RATE		SHIFT PAY _____ % ROTATION _____									
BASE MONTHLY RATE		ACCRUED SICK TIME _____									
LANGUAGE PAY		NEXT MERIT ELIGIBILITY DATE _____									
SERVICE PAY		RESET SERVICE PAY DATE TO _____									
EDUCATION PAY		UNIFORM POLICE AND FIRE ONLY									
SPECIAL PAY		COMP PAY _____ DAYS \$ _____									
MISCELLANEOUS PAY		COMP PAY _____ DAYS \$ _____									
TOTAL MONTHLY PAY		TOTAL ADJUSTMENTS (EXPLAIN) \$ _____									
		COMP PAY (THIS PAY PERIOD) \$ _____									
		COMP PAY (FUTURE PAY PERIODS) \$ _____									
EDUCATION LEVEL ATTAINED		EMPLOYEE CODES		RACE		PAYROLL CODE					
1. LESS THAN 6 GRADES		R-PERMANENT FULL TIME		1. WHITE		1. BIWEEKLY					
2. 6 BUT LESS THAN 9 GRADES		T-PERMANENT PART TIME		2. BLACK		2. WEEKLY					
3. 9 GRADES BUT NOT H.S. GRAD. OR G.E.D.		J-TEMPORARY FULL TIME		3. HISPANIC		3. POLICE/ALTERNATE					
4. H.S. GRAD. OR G.E.D.		X-TEMPORARY PART TIME		4. OTHER		4. FIRE					
5. ASSOCIATE DEGREE		PENSION CODES		5. ASIAN/PACIFIC ISLANDER							
6. BACHELOR'S DEGREE		E-CIVILIAN ERF		6. AMERICAN INDIAN							
7. MASTER'S DEGREE		B-POLICE/FIRE PENSION									
8. LAW DEGREE		X-NO PENSION DEDUCTIONS									
9. MD. PH.D. DVM OR OTHER DOCTORAL DEGREE		DRIVER TYPE									
		P-PRIMARY T-TERTIARY									
		S-SECONDARY N-NON-DRIVER									
COMMENTS:											
HRS. EDUCATION INCENTIVE CREDIT _____											
SPECIAL PAY TYPE _____											
PRIOR SERVICE CREDIT _____											
EXCEPTION _____											
APPROVED BY		DATE		CITY MANAGER		DATE					
DEPARTMENT		DATE		PERSONNEL		DATE					
CIVIL SERVICE		DATE		CITY CONTROLLER		DATE					

Dallas Police & Fire Pension System  
**TERMINATION AUTHORIZATION**

WHITE-PERSONNEL CIVIL SERVICE COPY GREEN-FINANCE CITY CONTROLLER COPY CANARY-RETIREMENT COPY PINK-DEPARTMENT COPY GOLD-DIVISION COPY

		Effective Date - First day employee did not work Job abandonment - first day after shown three work days X on payroll.		Dec. 9, 2002
<input type="checkbox"/> CLASSIFIED	<input type="checkbox"/> UNIFORM CLASSIFIED	<input type="checkbox"/> MINISTRATIVE UNCLASSIFIED	<input type="checkbox"/> LABOR	
<input type="checkbox"/> PERMANENT FULL TIME	<input type="checkbox"/> - PERMANENT PART TIME	<input type="checkbox"/> TEMPORARY FULL TIME	<input type="checkbox"/> - TEMPORARY PART TIME	
PAYROLL NO.	ORG. NO.	EMPLOYEE NO.	NAME AS SHOWN ON THE PAYROLL AND LEAVE REGISTER	P.I. NUMBER
			Jannett D. Washington	

TYPE OF TERMINATION	REASON	OVERALL PERFORMANCE
<input type="checkbox"/> 1 MILITARY DUTY LEAVE	[REDACTED]	[REDACTED]
<input type="checkbox"/> 2 REDUCTION IN FORCE		
<input checked="" type="checkbox"/> 3 RESIGNATION		
<input type="checkbox"/> 4 DISMISSAL		
<input type="checkbox"/> 5 RETIREMENT		
<input type="checkbox"/> 6 DISABILITY <input type="checkbox"/> NON-JOB <input type="checkbox"/> JOB		
<input type="checkbox"/> 7 DEATH <input type="checkbox"/> NON-JOB <input type="checkbox"/> JOB		
<input type="checkbox"/> 8 DID NOT COMPLETE PROBATION		
<input type="checkbox"/> 9 END OF ASSIGNMENT		
		<b>RECOMMENDATION</b> <input type="checkbox"/> 1 ELIGIBLE FOR REHIRE <input type="checkbox"/> 2 REVIEW PERSONNEL RECORDS  ATTACH LATEST PERFORMANCE EVALUATION MEMO TO FROM EMPLOYEE AND SUPPORTING DOCUMENTATION

FORWARDING ADDRESS: IF ONLY TWO LINES ARE REQUIRED USE TWO TOP LINES.	UNIFORM POLICE AND FIRE ONLY
	COMP PAY _____ DAYS      \$ _____
	COMP PAY _____ DAYS      \$ _____
	TOL ADJUSTMENTS (EXPLAIN)      \$ _____
	COMP PAY (THIS PAY PERIOD)      \$ _____
	COMP PAY (FUTURE PAY PERIODS)      \$ _____
COMMENTS	

LAST DAY TO WORK <u>12/6/2002</u> DAYS OFF <u>S/S</u>			
SUPERVISOR <i>[Signature]</i>	DATE <u>12/24/02</u>	CITY MANAGER	DATE
DEPARTMENT <i>[Signature]</i>	DATE <u>12/24/02</u>	PERSONNEL	DATE
CIVIL SERVICE <i>[Signature]</i>	DATE <u>12/24/2002</u>	FINANCE/CITY CONTROLLER	DATE

---

Linda N. Stevenson

[REDACTED]

[REDACTED]

---

February 3, 2003

Mr. Don Rohan  
Dallas Police & Fire Pension System  
2301 N. Akard, Suite 200  
Dallas, TX 75201

Dear Don:

With this letter, I am submitting my resignation from the Dallas Police & Fire Pension System effective February 14, 2003.

[REDACTED]

[REDACTED]

Sincerely,

*Linda N. Stevenson*

Linda N. Stevenson

## APPOINTMENT AUTHORIZATION

PERSONNEL SERVICE COPY BLUE - FINANCE CITY CONTROLLER COPY GREEN - RETIREMENT COPY CANARY - DEPARTMENT COPY PINK - DIVISION COPY GOLD - EMPLOYEE COPY												
<input checked="" type="checkbox"/> APPOINTMENT			<input type="checkbox"/> REAPPOINTMENT			<input type="checkbox"/> REINSTATEMENT			SERVICE CREDIT DATE _____		EFFECTIVE DATE 10-1-2001	
<input type="checkbox"/> CLASSIFIED			<input type="checkbox"/> UNIFORM CLASSIFIED			<input type="checkbox"/> ADMINISTRATIVE UNCLASSIFIED			<input type="checkbox"/> LABOR			
PAYROLL NO.		ORG. NO.		EMPL. NO.		NAME Linda N. Stevenson						
SOCIAL SECURITY NO.		BIRTH DATE		PI NO.		POS. CLASS		CLASS TITLE Accounting Manager		ED. LEVEL		
GRADE-STEP		EMPL. CODE		PENSION CODE		RACE		SEX		2		
TAX STATUS <input type="checkbox"/> NOT TAXED						NUMBER OF EXEMPTIONS 10						
ADDITIONAL WITHHOLDING EACH PAY PERIOD \$ _____												
PAYROLL CODE		T _____										
DRIVER TYPE				CHECK ONE: <input type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT								
ADDRESS _____						PHONE NO. _____ ZIP CODE _____						
ADDRESS _____												
ADDRESS _____												
PAY PERIOD RATE		_____				SHIFT PAY _____ % ROTATION _____						
BASE MONTHLY RATE		_____				ACCRUED SICK TIME _____						
LANGUAGE PAY		_____				NEXT MERIT ELIGIBILITY DATE _____						
SERVICE PAY		_____				RESET SERVICE PAY DATE TO _____						
EDUCATION PAY		_____				UNIFORM POLICE AND FIRE ONLY COMP PAY _____ DAYS \$ _____ COMP PAY _____ DAYS \$ _____ TOTAL ADJUSTMENTS (EXPLAIN) \$ _____ COMP PAY (THIS PAY PERIOD) \$ _____ COMP PAY (FUTURE PAY PERIODS) \$ _____						
SPECIAL PAY		_____										
MISCELLANEOUS PAY		_____										
TOTAL MONTHLY PAY		_____										
		_____										
EDUCATION LEVEL ATTAINED 1. LESS THAN 6 GRADES 2. 6 BUT LESS THAN 9 GRADES 3. 9 GRADES BUT NOT H.S. GRAD. OR G.E.D. 4. H.S. GRAD. OR G.E.D. 5. ASSOCIATE DEGREE 6. BACHELOR'S DEGREE 7. MASTER'S DEGREE 8. LAW DEGREE 9. MD, PH.D, DVM OR OTHER DOCTORAL DEGREE				EMPLOYEE CODES R—PERMANENT FULL TIME T—PERMANENT PART TIME J—TEMPORARY FULL TIME X—TEMPORARY PART TIME PENSION CODES E—CIVILIAN ERF B—POLICE/FIRE PENSION X—NO PENSION DEDUCTIONS DRIVER TYPE P—PRIMARY T—TERTIARY S—SECONDARY N—NON-DRIVER				RACE 1. WHITE 2. BLACK 3. HISPANIC 4. OTHER 5. ASIAN/PACIFIC ISLANDER 6. AMERICAN INDIAN		PAYROLL CODE 1. BIWEEKLY 2. WEEKLY 3. POLICE/ALTERNATE 4. FIRE		
COMMENTS: HRS. EDUCATION INCENTIVE CREDIT _____ SPECIAL PAY TYPE _____ PRIOR SERVICE CREDIT _____ EXCEPTION _____												
SUPERVISOR <i>[Signature]</i>				DATE 10/2/01		CITY MANAGER				DATE		
DEPARTMENT <i>Kick &amp; Tetam</i>				DATE 10/2/01		PERSONNEL				DATE		
CIVIL SERVICE				DATE		CITY CONTROLLER				DATE		

WHITE-PERSONNEL CIVIL SERVICE COPY GREEN-FINANCE CITY CONTROLLER COPY CANARY-RETIREMENT COPY PINK-DEPARTMENT COPY GOLD-DIVISION COPY

PER-01 REV 8/90 S/N753-034-004

July 14, 2003

Pat McGennis  
Dallas Police & Fire Pension System  
2301 N. Akard Suite 200  
Dallas, TX 75201

Dear Pat,

I regret that I am hereby giving two-week notice of my pending resignation from Dallas Police & Fire Pension System to be effective on July 25, 2003.



Sincerely,



Tonha Martinets

# APPOINTMENT AUTHORIZATION

WHITE - PERSONNEL CIVIL SERVICE COPY BLUE - FINANCE CITY CONTROLLER COPY GREEN - RETIREMENT COPY CANARY - DEPARTMENT COPY PINK - DIVISION COPY GOLD - EMPLOYEE COPY

<input checked="" type="checkbox"/> APPOINTMENT		<input type="checkbox"/> REAPPOINTMENT		<input type="checkbox"/> REINSTATEMENT		SERVICE CREDIT DATE		EFFECTIVE DATE March 18, 2002	
<input checked="" type="checkbox"/> UNCLASSIFIED		<input type="checkbox"/> UNIFORM CLASSIFIED		<input type="checkbox"/> ADMINISTRATIVE UNCLASSIFIED		<input type="checkbox"/> LABOR			
PAYROLL NO.		ORG. NO.		EMPL. NO.		NAME Tonia R. Martinets			
SOCIAL SECURITY NO.		BIRTH DATE		PI NO.		POS. CLASS		CLASS TITLE Receptionist	
GRADE-STEP		EMPL. CODE		PENSION CODE		RACE		SEX 1 2	
TAX STATUS		<input type="checkbox"/> SINGLE 1		<input type="checkbox"/> MARRIED 2		<input type="checkbox"/> MARRIED (CLAIMING SINGLE) 3		NUMBER OF EXEMPTIONS	
		<input type="checkbox"/> NOT TAXED		ADDITIONAL WITHHOLDING EACH PAY PERIOD \$					
PAYROLL CODE									
DRIVER TYPE		CHECK ONE:		<input type="checkbox"/> EXEMPT		<input type="checkbox"/> NON-EXEMPT			
ADDRESS						PHONE NO			
ADDRESS						ZIP CODE			
ADDRESS									
PAY PERIOD RATE				SHIFT PAY		% ROTATION			
BASE MONTHLY RATE				ACCRUED SICK TIME					
LANGUAGE PAY				NEXT MERIT ELIGIBILITY DATE					
SERVICE PAY				RESET SERVICE PAY DATE TO					
EDUCATION PAY				UNIFORM POLICE AND FIRE ONLY					
SPECIAL PAY				COMP PAY		DAYS		\$	
MISCELLANEOUS PAY				COMP PAY		DAYS		\$	
TOTAL MONTHLY PAY				TOTAL ADJUSTMENTS (EXPLAIN)				\$	
				COMP PAY (THIS PAY PERIOD)				\$	
				COMP PAY (FUTURE PAY PERIODS)				\$	
EDUCATION LEVEL ATTAINED		EMPLOYEE CODES		RACE		PAYROLL CODE			
1. LESS THAN 6 GRADES		R—PERMANENT FULL TIME		1. WHITE		1. BIWEEKLY			
2. 6 BUT LESS THAN 9 GRADES		T—PERMANENT PART TIME		2. BLACK		2. WEEKLY			
3. 9 GRADES BUT NOT H.S. GRAD. OR G.E.D.		J—TEMPORARY FULL TIME		3. HISPANIC		3. POLICE/ALTERNATE			
4. H.S. GRAD. OR G.E.D.		X—TEMPORARY PART TIME		4. OTHER		4. FIRE			
5. ASSOCIATE DEGREE		PENSION CODES		5. ASIAN/PACIFIC ISLANDER					
6. BACHELOR'S DEGREE		E—CIVILIAN ERF		6. AMERICAN INDIAN					
7. MASTER'S DEGREE		B—POLICE/FIRE PENSION							
8. LAW DEGREE		X—NO PENSION DEDUCTIONS							
9. MD, PH.D, DVM OR OTHER DOCTORAL DEGREE		DRIVER TYPE							
		P—PRIMARY T—TERTIARY							
		S—SECONDARY N—NON-DRIVER							
COMMENTS:									
HRS. EDUCATION INCENTIVE CREDIT									
SPECIAL PAY TYPE									
PRIOR SERVICE CREDIT									
EXCEPTION									
SIGNED		DATE		CITY MANAGER		DATE			
DEPARTMENT		DATE		PERSONNEL		DATE			
CIVIL SERVICE		DATE		CITY CONTROLLER		DATE			

# Dallas Police & Fire Pension System PAYROLL CHANGE AUTHORIZATION



WHITE - PERSONNEL/CIVIL SERVICE COPY

GREEN - FINANCE/CITY CONTROLLER COPY

CANARY - DEPARTMENT COPY

PINK - DIVISION COPY

GOLD - EMPLOYEE COPY

<input type="checkbox"/> P.R. NO. CHANGE or <input type="checkbox"/> EMPL. NO. CHANGE		<input checked="" type="checkbox"/> <b>PAY RATE CHANGE</b>		<input type="checkbox"/> MISC. CHANGE		SERVICE CREDIT DATE _____		EFFECTIVE DATE Dec. 11, 2002	
<input type="checkbox"/> CLASSIFIED		<input type="checkbox"/> UNIFORM CLASSIFIED		<input type="checkbox"/> ADMINISTRATIVE UNCLASSIFIED		<input type="checkbox"/> LABOR			
PR NO. (NEW) [REDACTED]		ORG. NO. (NEW) [REDACTED]		EMPL. NO. (NEW) [REDACTED]		NAME NEW: Tonia R. Martinets			
PR NO. (OLD) [REDACTED]		ORG. NO. (OLD) [REDACTED]		EMPL. NO. (OLD) [REDACTED]		NAME OLD: _____			
SOCIAL SECURITY NO. _____		BIRTH DATE _____		PI NO. _____		POS. CLASS _____		CLASS TITLE <b>Office Assistant</b>	
GRADE-STEP _____		EMPL. CODE _____		PENSION CODE _____		<input type="checkbox"/> MALE		<input type="checkbox"/> FEMALE	
TAX STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> NOT TAXED		<input type="checkbox"/> MARRIED <input type="checkbox"/> MARRIED (CLAIMING SINGLE)		NUMBER OF EXEMPTIONS _____		ADDITIONAL WITHHOLDING EACH PAY PERIOD \$ _____			
PAYROLL CODE _____		TX DRIVER'S LICENSE NO. _____		PUBLIC ACCESS <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> P <input type="checkbox"/> A					
DRIVER TYPE _____		CHECK ONE:		<input type="checkbox"/> EXEMPT		<input type="checkbox"/> NON-EXEMPT			
PAY PERIOD RATE [REDACTED]		OLD RATE [REDACTED]		NEW RATE [REDACTED]		SHIFT PAY _____		ROTATION _____ REMOVE _____	
BASE MONTHLY RATE [REDACTED]		[REDACTED]		[REDACTED]		PAY RATE CHANGE <b>Promotion</b>		PERCENTAGE [REDACTED] %	
LANGUAGE PAY _____		[REDACTED]		[REDACTED]		NEXT MERIT ELIGIBILITY DATE [REDACTED]		[REDACTED]	
SERVICE PAY _____		[REDACTED]		[REDACTED]		RESET SERVICE PAY DATE TO _____		[REDACTED]	
EDUCATION PAY _____		[REDACTED]		[REDACTED]		UNIFORM POLICE AND FIRE ONLY			
SPECIAL PAY _____		[REDACTED]		[REDACTED]		COMP PAY _____ DAYS \$ _____			
MISCELLANEOUS PAY _____		[REDACTED]		[REDACTED]		COMP PAY _____ DAYS \$ _____			
TOTAL MONTHLY PAY [REDACTED]		[REDACTED]		[REDACTED]		TOTAL ADJUSTMENTS (EXPLAIN) \$ _____			
[REDACTED]		[REDACTED]		[REDACTED]		COMP PAY (THIS PAY PERIOD) \$ _____			
[REDACTED]		[REDACTED]		[REDACTED]		COMP PAY (FUTURE PAY PERIODS) \$ _____			
[REDACTED]		[REDACTED]		[REDACTED]		HOURS AT NEW RATE [REDACTED] DAYS OFF [REDACTED]			
<b>EDUCATION LEVEL ATTAINED</b> 1. LESS THAN 6 GRADES 2. 6 BUT LESS THAN 9 GRADES 3. 9 GRADES BUT NOT H.S. GRAD. OR G.E.D. 4. H.S. GRAD. OR G.E.D. 5. ASSOCIATE DEGREE 6. BACHELOR'S DEGREE 7. MASTER'S DEGREE 8. LAW DEGREE 9. MD, PhD, DVM OR OTHER DOCTORAL DEGREE		<b>EMPLOYEE CODES</b> R—PERMANENT FULL TIME T—PERMANENT PART TIME J—TEMPORARY FULL TIME X—TEMPORARY PART TIME		<b>PENSION CODES</b> E—CIVILIAN ERF B—POLICE/FIRE PENSION X—NO PENSION DEDUCTIONS		<b>RACE</b> 1. WHITE 2. BLACK 3. HISPANIC 4. OTHER 5. ASIAN/PACIFIC ISLANDER 6. AMERICAN INDIAN		<b>PAYROLL CODE</b> 1. BIWEEKLY 2. WEEKLY 3. POLICE/ALTERNATE 4. FIRE	
<b>DRIVER TYPE</b> P—PRIMARY T—TERTIARY S—SECONDARY N—NON-DRIVER		<b>PAY RATE CHANGE TYPE</b> M—MERIT D—DEMOTION P—PROMOTION A—OTHER							
COMMENTS: HRS. EDUCATION INCENTIVE CREDIT _____ SPECIAL PAY TYPE _____ PRIOR SERVICE CREDIT _____ EXCEPTION _____									
PRECEDING P.I. NO. _____ Promotion to Office Assistant [REDACTED]									
TRANSFER RELEASE SIGNATURE									
SUPERVISOR <i>[Signature]</i>		DATE 12/24/02		CITY MANAGER		DATE			
DEPARTMENT <i>[Signature]</i>		DATE 12/24/02		PERSONNEL		DATE			
CIVIL SERVICE <i>[Signature]</i>		DATE 12/24/2002		CITY CONTROLLER		DATE			

# Dallas Police & Fire Pension System

## TERMINATION AUTHORIZATION

WHITE-PERSONNEL CIVIL SERVICE COPY GREEN-FINANCE CITY CONTROLLER COPY CANARY-RETIREMENT COPY PINK-DEPARTMENT COPY GOLD-DIVISION COPY

Effective Date - First day employee did not work. Job abandonment - first day after shown three work days X on payroll.	July 28, 2003
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- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> CLASSIFIED              | <input type="checkbox"/> UNIFORM CLASSIFIED      | <input type="checkbox"/> ADMINISTRATIVE UNCLASSIFIED | <input type="checkbox"/> LABOR                   |
| <input type="checkbox"/> R - PERMANENT FULL TIME | <input type="checkbox"/> T - PERMANENT PART TIME | <input type="checkbox"/> J - TEMPORARY FULL TIME     | <input type="checkbox"/> X - TEMPORARY PART TIME |

PAYROLL NO. 	ORG. NO.	EMPLOYEE NO. 	NAME AS SHOWN ON THE PAYROLL AND LEAVE REGISTER Tonia R. Martinets	P.I. NUMBER
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TYPE OF TERMINATION	REASON	OVERALL PERFORMANCE
<input type="checkbox"/> 1 MILITARY DUTY LEAVE		
<input type="checkbox"/> 2 REDUCTION IN FORCE		
<input checked="" type="checkbox"/> 3 RESIGNATION		
<input type="checkbox"/> 4 DISMISSAL		
<input type="checkbox"/> 5 RETIREMENT		
<input type="checkbox"/> 6 DISABILITY <input type="checkbox"/> NON-JOB <input type="checkbox"/> JOB		
<input type="checkbox"/> 7 DEATH <input type="checkbox"/> NON-JOB <input type="checkbox"/> JOB		
<input type="checkbox"/> 8 DID NOT COMPLETE PROBATION		
<input type="checkbox"/> 9 END OF ASSIGNMENT		

**RECOMMENDATION**

ATTACH LATEST PERFORMANCE EVALUATION MEMO TO/FROM EMPLOYEE AND SUPPORTING DOCUMENTATION

FORWARDING ADDRESS: IF ONLY TWO LINES ARE REQUIRED USE TWO TOP LINES. 	UNIFORM POLICE AND FIRE ONLY COMP PAY _____ DAYS \$ _____ COMP PAY _____ DAYS \$ _____ TOL ADJUSTMENTS (EXPLAIN) \$ _____ COMP PAY (THIS PAY PERIOD) \$ _____ COMP PAY (FUTURE PAY PERIODS) \$ _____
ZIP CODE _____	

COMMENTS

LAST DAY TO WORK July 25, 2003 DAYS OFF S/S

SUPERVISOR 	DATE <u>10/7/03</u>	CITY MANAGER	DATE
DEPARTMENT 	DATE <u>10/7/03</u>	PERSONNEL	DATE
CIVIL SERVICE	DATE	FINANCE/CITY CONTROLLER	DATE

[REDACTED]

**From:** Vijay Freeman  
**Sent:** Friday, September 05, 2003 4:26 PM  
**Cc:** [REDACTED]  
**Subject:** Personnel

[REDACTED]

[REDACTED] resignation on September 12th 2003. [REDACTED]

OCTOBER 14, 2000

CITY OF DALLAS  
EMPLOYEE DATA STATEMENT  
Civilian Employee

Name: VIJAY A FREEMAN

EMPLOYMENT DATES:

Original Appointment:..... 06/02/99

Position Title: ACCOUNTANT II

Dallas Police & Fire Pension System  
**TERMINATION AUTHORIZATION**

WHITE-PERSONNEL CIVIL SERVICE COPY GREEN-FINANCE CITY CONTROLLER COPY CANARY-RETIREMENT COPY PINK-DEPARTMENT COPY GOLD-DIVISION COPY

			Effective Date - First day employee did not work. Job abandonment - first day after shown three work days X on payroll.	Sept. 15, 2003
<input type="checkbox"/> CLASSIFIED	<input type="checkbox"/> UNIFORM CLASSIFIED	<input type="checkbox"/> ADMINISTRATIVE UNCLASSIFIED	<input type="checkbox"/> LABOR	
<input type="checkbox"/> R - PERMANENT FULL TIME	<input type="checkbox"/> T - PERMANENT PART TIME	<input type="checkbox"/> J - TEMPORARY FULL TIME	<input type="checkbox"/> X - TEMPORARY PART TIME	
PAYROLL NO. [REDACTED]	ORG. NO.	EMPLOYEE NO. [REDACTED]	NAME AS SHOWN ON THE PAYROLL AND LEAVE REGISTER Vijay F. Freeman	P.I. NUMBER

**TYPE OF TERMINATION**

- ☐ 1 MILITARY DUTY LEAVE  
☐ 2 REDUCTION IN FORCE  
☒ 3 RESIGNATION  
☐ 4 DISMISSAL  
☐ 5 RETIREMENT  
☐ 6 DISABILITY ☐ NON-JOB ☐ JOB  
☐ 7 DEATH ☐ NON-JOB ☐ JOB  
☐ 8 DID NOT COMPLETE PROBATION  
☐ 9 END OF ASSIGNMENT

**REASON**

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

**OVERALL PERFORMANCE**

[REDACTED]  
[REDACTED]

**RECOMMENDATION**

[REDACTED]  
[REDACTED]

ATTACH LATEST PERFORMANCE  
EVALUATION MEMO TO/FROM  
EMPLOYEE AND SUPPORTING  
DOCUMENTATION

FORWARDING ADDRESS: IF ONLY TWO LINES ARE REQUIRED USE TWO TOP LINES.

[REDACTED]  
[REDACTED]

ZIP CODE  
75211

**UNIFORM POLICE AND FIRE ONLY**

COMP PAY \_\_\_\_\_ DAYS \$ \_\_\_\_\_  
COMP PAY \_\_\_\_\_ DAYS \$ \_\_\_\_\_  
TOL ADJUSTMENTS (EXPLAIN) \$ \_\_\_\_\_  
COMP PAY (THIS PAY PERIOD) \$ \_\_\_\_\_  
COMP PAY (FUTURE PAY PERIODS) \$ \_\_\_\_\_

COMMENTS

LAST DAY TO WORK Sept. 15, 2003 DAYS OFF S/S

SUPERVISOR <i>[Signature]</i>	DATE 9/15/03	CITY MANAGER	DATE
DEPARTMENT <i>[Signature]</i>	DATE 9/15/03	PERSONNEL	DATE
CIVIL SERVICE	DATE	FINANCE/CITY CONTROLLER	DATE

OCTOBER 14, 2000

CITY OF DALLAS  
EMPLOYEE DATA STATEMENT  
Civilian Employee

Name: MARY C LESTER

EMPLOYMENT DATES:

Original Appointment:..... 08/04/80✓

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

## PAYROLL CHANGE AUTHORIZATION

WHITE - PERSONNEL CIVIL SERVICE COPY

GREEN - FINANCE CITY CONTROLLER COPY

CANARY - DEPARTMENT COPY

PINK - DIVISION COPY

GOLD - EMPLOYEE COPY

P R NO. CHANGE or <input type="checkbox"/> EMPL. NO. CHANGE		<input checked="" type="checkbox"/> PAY RATE CHANGE		<input type="checkbox"/> MISC. CHANGE		SERVICE CREDIT DATE		EFFECTIVE DATE			
<input type="checkbox"/> CLASSIFIED		<input type="checkbox"/> UNIFORM CLASSIFIED		<input type="checkbox"/> ADMINISTRATIVE UNCLASSIFIED		<input type="checkbox"/> LABOR					
PR NO. (NEW)	ORG. NO. (NEW)	EMPL. NO. (NEW)	NAME (NEW) Mary C. Lester								
PR NO. (OLD)	ORG. NO. (OLD)	EMPL. NO. (OLD)	NAME (OLD)								
SOCIAL SECURITY NO.		BIRTH DATE		PI NO.		POS. CLASS		CLASS TITLE Benefits Manager			
GRADE-STEP		EMPL. CODE		PENSION CODE		RACE					
TAX STATUS		<input type="checkbox"/> SINGLE 1		<input type="checkbox"/> MARRIED 2		<input type="checkbox"/> MARRIED (CLAIMING SINGLE) 3		NUMBER OF EXEMPTIONS			
<input type="checkbox"/> NOT TAXED		ADDITIONAL WITHHOLDING EACH PAY PERIOD \$									
PAYROLL CODE		TX DRIVER'S LICENSE NO.				PUBLIC ACCESS <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> P <input type="checkbox"/> A					
DRIVER TYPE		CHECK ONE: <input type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT									
PAY PERIOD RATE				SHIFT PAY		% ROTATION		REMOVE			
BASE MONTHLY RATE				PAY RATE CHANGE TYPE		Permutation		PERCENTAGE			
LANGUAGE PAY				NEXT MERIT ELIGIBILITY DATE							
SERVICE PAY				RESET SERVICE PAY DATE TO							
EDUCATION PAY				UNIFORM POLICE AND FIRE ONLY							
SPECIAL PAY				COMP PAY		DAYS		\$			
MISCELLANEOUS PAY				COMP PAY		DAYS		\$			
TOTAL MONTHLY PAY				TOTAL ADJUSTMENTS (EXPLAIN)				\$			
				COMP PAY (THIS PAY PERIOD)				\$			
				COMP PAY (FUTURE PAY PERIODS)				\$			
				HOURS AT NEW RATE							
<b>EDUCATION LEVEL ATTAINED</b> 1. LESS THAN 6 GRADES 2. 6 BUT LESS THAN 9 GRADES 3. 9 GRADES BUT NOT H.S. GRAD. OR G.E.D. 4. H.S. GRAD. OR G.E.D. 5. ASSOCIATE DEGREE 6. BACHELOR'S DEGREE 7. MASTER'S DEGREE 8. LAW DEGREE 9. MD, PhD, DVM OR OTHER DOCTORAL DEGREE				<b>EMPLOYEE CODES</b> R—PERMANENT FULL TIME T—PERMANENT PART TIME J—TEMPORARY FULL TIME X—TEMPORARY PART TIME <b>PENSION CODES</b> E—CIVILIAN ERF B—POLICE/FIRE PENSION X—NO PENSION DEDUCTIONS <b>DRIVER TYPE</b> P—PRIMARY T—TERTIARY S—SECONDARY N—NON-DRIVER				<b>RACE</b> 1. WHITE 2. BLACK 3. HISPANIC 4. OTHER 5. ASIAN/PACIFIC ISLANDER 6. AMERICAN INDIAN		<b>PAYROLL CODE</b> 1. BIWEEKLY 2. WEEKLY 3. POLICE ALTERNATE 4. FIRE	
<b>COMMENTS:</b> HRS. EDUCATION INCENTIVE CREDIT SPECIAL PAY TYPE PRIOR SERVICE CREDIT EXCEPTION				PRECEDING P.I. NO. Up-Grade to Benefits Manager 8%							
SUPERVISOR DEPARTMENT CIVIL SERVICE				DATE 2/14/01 2/14/2001		CITY MANAGER PERSONNEL CITY CONTROLLER		TRANSFER RELEASE SIGNATURE DATE			