Body Cam footage

Deputy Chief:
Major:
Captain:
Lieutenant: #378
Sergeant:
Supervisor:
Log # DC2020-18

EMPLOYEE COUNSELING REPORT

Name: Alberto Tellez
Department: Police
Position: Sergeant
Supervisor: Lieutenant Daniel Muñecas
Date of Incident: July 11th, 2020
Time of Incident: 7:24 p.m.
Level of Action: ☐ Counseling & Verbal Warning ☑ Written Warning
Type of Infraction: ☑ Violation of Policies and Procedures ☐ Other Violation, Please specify:

Nature of the incident: See Narrative.

Facts of the incident: See Narrative.

Witnesses: N/A

Employee's Comments:

Timetable for Improvement: ☑ Immediate ☐ 30 days ☐ 60 days ☐ Other

Additional Comments: De-escalation Training is recommended by this writer.

Supervisor's Signature: #378 **Date:** 7/15/20
Department Head's Signature: **Date:** 7/29/20
Human Resource Director's Signature: 8/19/20

Employee's Response: ☒ I concur with the above statement. ☐ I disagree with the above statement and will submit written comments.

I have read, understand, and received a copy of this report.

Employee Signature: **Date:** 8.20.20

[Signature does not necessarily indicate agreement with this report, only that I have received a copy of the report.]

CC: Employee, Personnel File, Supervisor, Internal Affairs