

F-4



DATE: October 1, 2005

TO: DEPUTY DAHEL ACOSTA CCN: 10185
DISTRICT 8-WESTON

FROM: Sheriff Ken Jenne *[Signature]*

SUBJECT: DLE Deputies & Sergeants - Salary Adjustment – October 2005

I am pleased to announce that effective the first full pay period in October 2005 (October 1 - October 14) the pay schedule for DLE Deputies and Sergeants will be increased by three percent (3%). This adjustment will be processed for employees whose salaries fall within the established BSO pay ranges. This increase will be reflected in paychecks received on October 21, 2005.

Should you require additional information, please contact the Compensation section representatives at 321-4419 or 321-4420.

cc: Colonel John Auer, Department of Law Enforcement
Colonel James Wimberly, Department of Detention and Community Control
Chief Charles Lanza, Department of Fire Rescue and Emergency Services
Executive Director John Curry, Department of Administration
Director William MacDonald, Bureau of Finance and Budget
General Counsel Edward Dion, Department of Legal Affairs

So
Ac



**Broward Sheriff's Office
DLE - Field Force Activation
Payment Authorization**

To be completed by requesting employee's supervisor:

Employee Name ACOSTA, D. J. CCN 10185

Classification Title Deputy Sheriff Work Location CONVENTION CENTER
OAS Echo Field Force
Deployment.

O.A.S.

Date(s) Worked	Number of Hour(s) Worked
<u>6/03/05 - 6/04/05</u>	<u>12</u>
<u>6/04/05 - 6/05/05</u>	<u>12</u>
<u>6/5/05 - 6/06/05</u>	<u>12</u>
<u>6/06/05 - 6/07/05</u>	<u>12</u>

Total Hours Worked 48

To be completed by authorizing supervisors/directors:

Supervisor's Signature _____ Major's/Asst. Director's Signature M. J. [Signature] 6/15/05

Captain's/Commander's Signature _____ Lt. Colonel/Director's Signature [Signature]
Lt. Colonel Héctor M. Pesquera

Note: When signatures are obtained, retain copy for employee's district file and send original to Human Resources.
For the Bureau of Human Resource's use only:

Pay Grade: 15/5 Hourly Rate: \$ 23,2926 TOTAL HOURS: 48

Comments: _____

[Signature] 8/20/05
Approved By (Initials)/Date

MB 8/24/2005
Processed By (Initials)/Date





**KEN JENNE
SHERIFF
BROWARD COUNTY
POST OFFICE BOX 9507
FORT LAUDERDALE, FLORIDA 33310**

DATE: July 29, 2005
MEMO TO: Distribution
FROM: Human Resources
SUBJECT: Personnel Order 05-151 effective August 6, 2005


Deputy Sheriff – DLE/CC Dahel Acosta CCN 10185 PCN 26012 is hereby transferred from Dept. 3240/ District 3 - Airport to Dept. 3445/ District 8 - Weston PCN 21144 reporting to Greg Page, District Chief.

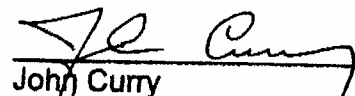
Deputy Sheriff – DLE Angelo Diedrick CCN 11510 PCN 21144 is hereby transferred from Dept. 3445/ District 8 - Weston to Dept. 3240/ District 3 - Airport PCN 26012 reporting to Roy Liddicott, District Chief.

Deputy Sheriff – DLE Jeff St Sauveur CCN 9982 PCN 20595 is hereby transferred from Dept. 3270/ District 5 – Central Broward to Dept. 3260/ District 4 – Lauderdale Lakes PCN 20498 reporting to Andrew Smalling, District Chief.

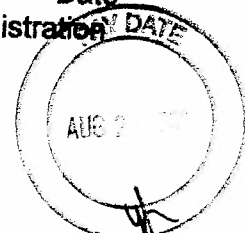
Deputy Sheriff – DLE Ronald Faircloth II CCN 14118 PCN 20498 is hereby transferred from Dept. 3260/ District 4 – Lauderdale Lakes to Dept. 3270/ District 5 – Central Broward PCN 20595 reporting to George Jarboe, District Chief.

Reviewed and Recommended by:


Colonel John Auer
Exec. Director/Dept. of Law Enforcement
Date 8/2/05


John Curry
Exec. Director/ Dept. of Administration
Date 8-2-05

800 code - 2BKS



06/20/2005
09:48:13

Broward County Sheriff's Office
PERSONNEL ROSTER CARD

PAGE 1
pmacthis

* Current Status ****

En 010185 3240 DAHEL J ACOSTA Stat: A Pos: 000026012
SSN [REDACTED] BU: PBA GR/ST: 15 /06
298 DEPUTY SHE
Hire : 05/30/2000 23240 DIST 3 AIR
Birth [REDACTED] Rate: 24.6550 Per Sal: 1,972.40 Ann Sal: 51,282.40
Perm : 05/30/2000

**** Action History ****


From: 01/01/1900 To: 12/31/9999

Date	Loc	Civ	BU	Pos #	Org	GR/ST	Rate	Per Sal	Ann Sal
05/19/00				0		/00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
05/30/00				0		/00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
04/07/01	3455		PBA	21298	23455	15 /01	16.0938	1,287.50	33,475.00
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/02/01	3455		PBA	21298	23455	15 /02	17.0352	1,362.82	35,433.32
Action: ANNUAL INC		Reason:		Title: 298 DEPUTY SHE					
10/06/01	3455		PBA	21298	23455	15 /02	17.5463	1,403.70	36,496.20
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/01/02	3455		PBA	21298	23455	15 /03	18.5722	1,485.78	38,630.28
Action: ANNUAL INC		Reason:		Title: 298 DEPUTY SHE					
5/02	3455		PBA	21298	23455	15 /03	19.3151	1,545.21	40,175.46
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/14/03	3240		PBA	26012	23240	15 /04	20.4446	1,635.57	42,524.82
Action: ANNUAL INC		Reason:		Title: 298 DEPUTY SHE					
10/01/03	3240		PBA	26012	23240	15 /04	21.3646	1,709.17	44,438.42
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/12/04	3240		PBA	26012	23240	15 /05	22.6142	1,809.14	47,037.64
Action: ANNUAL INC		Reason:		Title: 298 DEPUTY SHE					
10/02/04	3240		PBA	26012	23240	15 /05	23.2926	1,863.41	48,448.66
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/11/05	3240		PBA	26012	23240	15 /06	24.6550	1,972.40	51,282.40
Action: ANNUAL INC		Reason:		Title: 298 DEPUTY SHE					



DATE: October 1, 2004

TO: DLE DEPUTY DAHEL ACOSTA CCN: 10185
DISTRICT 3-AIRPORT

FROM: Sheriff Ken Jenne 

SUBJECT: DLE Deputies and Sergeants Salary Adjustment – October 2004

I am pleased to announce that effective the first full pay period in October 2004 (October 2 - October 15) the pay schedule for DLE Deputies and Sergeants will be increased by three percent (3%). This adjustment will be processed for employees whose salaries fall within the established BSO pay ranges. This increase will be reflected in paychecks received on October 22, 2004.


Should you require additional information, please contact the Compensation section representatives at 321-4419 or 321-4420.

cc: Colonel Thomas Carney, Undersheriff, Department of Law Enforcement
Executive Director John Curry, Department of Administration
Major Michael C. Goldstein, Director, Bureau of Human Resources
Director William MacDonald, Bureau of Finance and Budget
Acting General Counsel Kim Kisslan, Department of Legal Affairs
Employee Personnel File



DATE: October 1, 2004

TO: DLE DEPUTY DAHEL ACOSTA CCN: 10185
DISTRICT 3-AIRPORT

FROM: Sheriff Ken Jenne 

SUBJECT: DLE Deputies and Sergeants Salary Adjustment – October 2004

I am pleased to announce that effective the first full pay period in October 2004 (October 2 - October 15) the pay schedule for DLE Deputies and Sergeants will be increased by three percent (3%). This adjustment will be processed for employees whose salaries fall within the established BSO pay ranges. This increase will be reflected in paychecks received on October 22, 2004.

Should you require additional information, please contact the Compensation section representatives at 321-4419 or 321-4420.

cc: Colonel Thomas Carney, Undersheriff, Department of Law Enforcement
Executive Director John Curry, Department of Administration
Major Michael C. Goldstein, Director, Bureau of Human Resources
Director William MacDonald, Bureau of Finance and Budget
Acting General Counsel Kim Kisslan, Department of Legal Affairs
Employee Personnel File

06/18/2004
09:47:34

Broward County Sheriff's Office
PERSONNEL ROSTER CARD

PAGE 1
pmacthis

Current Status ****

Emp #: 010185 3240 DAHEL J ACOSTA Stat: A Pos: 000026012
SSN: [REDACTED] BU: PBA GR/ST: 15 /05
298 DEPUTY SHE
Hire : 05/30/2000 [REDACTED] 23240 DIST 3 AIR
Birth: [REDACTED] Rate: 22.6142 Per Sal: 1,809.14 Ann Sal: 47,037.64
Perm : 05/30/2000

**** Action History ****

From: 01/01/1900 To: 12/31/9999


Date	Loc	Civ	BU	Pos #	Org	GR/ST	Rate	Per Sal	Ann Sal
05/19/00				0		/00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
05/30/00				0		/00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
04/07/01	3455		PBA	21298	23455	15 /01	16.0938	1,287.50	33,475.00
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/02/01	3455		PBA	21298	23455	15 /02	17.0352	1,362.82	35,433.32
Action: ANNUAL INC		Reason:		Title: 298 DEPUTY SHE					
10/06/01	3455		PBA	21298	23455	15 /02	17.5463	1,403.70	36,496.20
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/01/02	3455		PBA	21298	23455	15 /03	18.5722	1,485.78	38,630.28
Action: ANNUAL INC		Reason:		Title: 298 DEPUTY SHE					
06/05/02	3455		PBA	21298	23455	15 /03	19.3151	1,545.21	40,175.46
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/14/03	3240		PBA	26012	23240	15 /04	20.4446	1,635.57	42,524.82
Action: ANNUAL INC		Reason:		Title: 298 DEPUTY SHE					
10/01/03	3240		PBA	26012	23240	15 /04	21.3646	1,709.17	44,438.42
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/12/04	3240		PBA	26012	23240	15 /05	22.6142	1,809.14	47,037.64
Action: ANNUAL INC		Reason:		Title: 298 DEPUTY SHE					

JUL - 1 2004



DATE: September 30, 2003

TO: DEPUTY DAHEL ACOSTA CCN: 10185
DISTRICT 3-AIRPORT

FROM: Sheriff Ken Jenne 

SUBJECT: DLE Deputies and Sergeants Salary Adjustment – October 2003

I am pleased to announce that effective the first full pay period in October 2003 (October 4 - October 17) the pay schedule for DLE Deputies and Sergeants will be increased by four and one-half percent (4 1/2%). This adjustment will be processed for employees whose salaries fall within the established BSO pay ranges. This increase will be reflected in paychecks received on October 24, 2003.

Should you require additional information, please contact the Compensation section representatives at 321-4419 or 321-4420.

cc: Colonel Thomas Carney, Undersheriff, Department of Law Enforcement
Colonel James Wimberly, Department of Detention and Community Control
Executive Director John Curry, Department of Administration
Inspector General Martin Rahinsky, Dept. of Professional Standards
Major Michael C. Goldstein, Director, Bureau of Human Resources
Director William MacDonald, Bureau of Finance and Budget
Legal Counsel Kim Kisslan, Department of Legal Affairs
Employee Personnel File



BROWARD SHERIFF'S OFFICE CHANGE OF EMPLOYEE INFORMATION

NAME: DANIEL ACOSTA
CCN: 10185 SOCIAL SECURITY NUMBER _____
JOB TITLE: DEPT SHERIFF
CURRENT ASSIGNMENT: D-3

CHECK APPROPRIATE BOXES:

- NAME CHANGE (Attach Supporting Documentation*)
- ADDRESS CHANGE
- TELEPHONE NUMBER CHANGE
- MARITAL STATUS CHANGE

Supporting Documentation Should Include copy of Social Security Card/Receipt and Marriage License or Divorce Decree

REVISED PERSONAL INFORMATION:

NAME: _____
STREET ADDRESS: _____
CITY, STATE: _____
ZIP CODE: _____
TELEPHONE NUMBER: _____

AUG 15 2003
MB

I hereby authorize release of the above to BSO department/divisions requiring this information.

SIGNATURE: [Signature] CNN: 10185 DATE: 7/22/03

Distribution: White - Human Resources Green - District/Division Yellow - Communications Pink - Employee Benefits Goldenrod - Employee

08/07/2003
09:41:50

Broward County Sheriff's Office
PERSONNEL ROSTER CARD

PAGE 1
pmacthis

*** Current Status ***

Emp # 010185 3240 DANIEL J COSTA Stat: A Pos#: 026012
SSN # [REDACTED] BU: PBA GR/ST:15 /04
298 DEPUTY SHE
Hire : 05/30/2000 23240 DIST 3 AIR
Birth: [REDACTED] Rate: 20.4446 Per Sal: 1,635.57 Ann Sal: 42,524.82
Perm : 05/30/2000

**** Action History ****

From: 01/01/1900 To: 12/31/9999

Date	Loc	Civ	BU	Pos #	Org	GR/ST	Rate	Per Sal	Ann Sal
05/19/00				00000		/00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
05/30/00				00000		/00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
04/07/01	3455		PBA	21298	23455	15 /01	16.0938	1,287.50	33,475.00
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/02/01	3455		PBA	21298	23455	15 /02	17.0352	1,362.82	35,433.32
Action: Annual Inc		Reason:		Title: 298 DEPUTY SHE					
10/06/01	3455		PBA	21298	23455	15 /02	17.5463	1,403.70	36,496.20
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/01/02	3455		PBA	21298	23455	15 /03	18.5722	1,485.78	38,630.28
Action: Annual Inc		Reason:		Title: 298 DEPUTY SHE					
07/05/02	3455		PBA	21298	23455	15 /03	19.3151	1,545.21	40,175.46
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/14/03	3240		PBA	26012	23240	15 /04	20.4446	1,635.57	42,524.82
Action: Annual Inc		Reason:		Title: 298 DEPUTY SHE					

AUG 15 2003

06/19/2003
15:58:51

Broward County Sheriff's Office
PERSONNEL ROSTER CARD

PAGE 1
pmacthis

**** Current Status ****

Emp: 010185 3240 DAHEL ACOSTA Stat: A Pos#: 026012
S.S. [REDACTED] BU: PBA GRST: 15 -04
298 DEPUTY SHE
Hire : 05/30/2000 [REDACTED] 23240 DIST 3 AIR
Birth: [REDACTED] Rate: 20.4446 Per-Sal: 1,635.57 Ann-Sal: 42,524.82
Perm : 05/30/2000

**** Action History ****

From: 01/01/1900 To: 12/31/9999

Date	Loc	Civ	BU	Pos #	Org	GRST	Rate	Per-Sal	Ann-Sal
05/19/00				00000		00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
05/30/00				00000		00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
04/07/01	3455		PBA	21298	23455	15	01	16.09381,287.50	33,475.00
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/02/01	3455		PBA	21298	23455	15	02	17.03521,362.82	35,433.32
Action: Annual Inc		Reason:		Title: 298 DEPUTY SHE					
10/06/01	3455		PBA	21298	23455	15	02	17.54631,403.70	36,496.20
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/01/02	3455		PBA	21298	23455	15	03	18.57221,485.78	38,630.28
Action: Annual Inc		Reason:		Title: 298 DEPUTY SHE					
05/02	3455		PBA	21298	23455	15	03	19.31511,545.21	40,175.46
Action: COLA		Reason:		Title: 298 DEPUTY SHE					
06/14/03	3240		PBA	26012	23240	15	04	20.44461,635.57	42,524.82
Action: Annual Inc		Reason:		Title: 298 DEPUTY SHE					

JUL 03 2003



DATE: April 14, 2003

TO: DEPUTY - DOD JOSE ACOSTA CCN: 8557
DOD & CC

FROM: Sheriff Ken Jenne

SUBJECT: FOPE Detention Deputies & Sergeants Salary Adjustment – April 2003

I am pleased to announce that effective the first full pay period in April 2003 (April 5 – April 18), the pay schedule for FOPE Detention Deputies and Sergeants will be increased by two and one-half percent (2 1/2%). This adjustment will be processed for employees whose salaries fall within the established BSO pay ranges. This increase will be reflected in paychecks received on April 25, 2003.

Should you require additional information, please contact the Compensation section representatives at 321-4419 or 321-4420.

cc: Colonel Thomas Carney, Undersheriff, Department of Law Enforcement
Colonel James Wimberly, Department of Detention and Community Control
Executive Director John Curry, Department of Administration
Inspector General Martin Rahinsky, Dept. of Professional Standards
Major Michael C. Goldstein, Director, Bureau of Human Resources
Director William MacDonald, Bureau of Finance and Budget
Legal Counsel Kim Kisslan, Department of Legal Affairs
Employee Personnel File



DATE: October 18, 2002

**TO: DEPUTY DAHEL ACOSTA CCN: 10185
DISTRICT 11-POMPANO BEACH**

FROM: Sheriff Ken Jenne

SUBJECT: DLE Deputy and Sergeant Salary Adjustment – October 2002

I am pleased to announce that effective the first full pay period in October 2002 (October 5 – October 18) the pay schedule for DLE Deputies and Sergeants will be increased by four percent (4%). This adjustment will be processed for employees whose salaries fall within the established BSO pay ranges. This increase will be reflected in paychecks received on October 25, 2002.

Should you require additional information, please contact the Compensation section representatives at 321-4419 or 321-4420.

cc: Colonel Thomas Carney, Undersheriff, Department of Law Enforcement
Executive Director John Curry, Department of Administration
Inspector General Martin Rahinsky, Dept. of Professional Standards
Major Michael C. Goldstein, Director, Bureau of Human Resources
Director William MacDonald, Bureau of Finance and Budget
Legal Counsel Kim Kisslan, Department of Legal Affairs
Employee Personnel File

06/06/2002
14:41:20

Broward County Sheriff's Office
PERSONNEL ROSTER CARD

PAGE 1
pmacthis

*** Current Status ***

E: 010185 3455 DAHEL ACOSTA Stat: A Pos#: 021298
S.S. [REDACTED] BU: PBA GRST: 15 -03
298 DEPUTY SHE
Hire : 05/30/2000 23455 D11/POMPAN
Birth: [REDACTED] Rate: 18.5722 Per-Sal: 1,485.78 Ann-Sal: 38,630.28
Perm : 05/30/2000

**** Action History ****

From: 01/01/1900 To: 12/31/9999

Date	Loc	Civ	BU	Pos #	Org	GRST	Rate	Per-Sal	Ann-Sal
05/19/00				00000		00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
05/30/00				00000		00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
04/07/01	3455		PBA	21298	23455	15	01 16.09381,287.50	33,475.00	
Action: COLA		Reason:		Title: 298		DEPUTY SHE			
06/02/01	3455		PBA	21298	23455	15	02 17.03521,362.82	35,433.32	
Action: Annual Inc		Reason:		Title: 298		DEPUTY SHE			
10/06/01	3455		PBA	21298	23455	15	02 17.54631,403.70	36,496.20	
Action: COLA		Reason:		Title: 298		DEPUTY SHE			
06/01/02	3455		PBA	21298	23455	15	03 18.57221,485.78	38,630.28	
Action: Annual Inc		Reason:		Title: 298		DEPUTY SHE			

JUN 21 2002



DATE: March 5, 2002

TO: DEPUTY SHERIFF/CC DAHEL ACOSTA CCN - 10185
DISTRICT 11-POMPANO BEACH

FROM: Sheriff Ken Jenne

SUBJECT: Wage Increase

Successful negotiations between the Police Benevolent Association (PBA) and the Sheriff's Office have resulted in a finalized contract for Department of Law Enforcement Deputies and Sergeants. According to Article 19 of the contract, the pay scale for Deputies and Sergeants will be increased by three percent (3%) effective the first full pay period in October 2001. This adjustment will be processed for those employees whose salary falls within the established BSO pay range.

This salary adjustment will be reflected in paychecks received on March 15, 2002. A separate check will also be distributed on March 29, 2002 for the retroactive amount.

Should you require additional information, please contact Compensation Manager Joanna Hely at 321-4418 or Senior Human Resources Analyst Jennifer Wheeler at 321-4416.

cc: Colonel Thomas Carney, Undersheriff, Department of Law Enforcement
Colonel Harold Wilber, Executive Director, Department of Detention & Community Control
Executive Director John Curry, Department of Administration
Major Michael C. Goldstein, Bureau of Human Resources
Director William MacDonald, Bureau of Finance and Budget
Assistant Director Elijah Williams, Department of Legal Affairs

06/15/2001
15:20:11

Broward County Sheriff's Office
PERSONNEL ROSTER CARD

PAGE 1
pmacthis

*** Current Status ***

Emp #: 010185 3455 DAHEL ACOSTA Stat: A Pos#: 021298
S.S. [REDACTED] BU: PBA GRST: 15 -02
298 DEPUTY SHE
Hire : 05/30/00 23455 POMPANO BE
Birth [REDACTED] te: 17.0352 Per-Sal: 1,362.82 Ann-Sal: 35,433.32
Perm : 05/30/2000

**** Action History ****

From: 01/01/1900 To: 12/31/9999

Date	Loc	Civ	BU	Pos #	Org	GRST	Rate	Per-Sal	Ann-Sal
05/19/00				00000		00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
05/30/00				00000		00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
04/07/01	3455		PBA	21298	23455	15	01 16.09381,	287.50	33,475.00
Action: COLA		Reason:		Title: 298		DEPUTY SHE			
06/02/01	3455		PBA	21298	23455	15	02 17.03521,	362.82	35,433.32
Action: Annual Inc		Reason:		Title: 298		DEPUTY SHE			



DATE: April 2, 2001

TO: DEPUTY DAHEL ACOSTA CCN: 10185
DISTRICT 11 POMPANO BEACH

FROM: Sheriff Ken Jenne

SUBJECT: PBA Deputy and Sergeant Salary Adjustment – April 2001

I am pleased to announce effective the first full pay period in April 2001 (April 7 – April 20) the pay schedule for PBA Deputies and Sergeants will be increased by three percent (3%). This adjustment will be processed for employees whose salaries fall within the established BSO pay ranges. This increase will be reflected in paychecks received on April 27, 2001.

Should you require additional information, please contact the Compensation section representatives at 321-4419 or 321-4420.

cc: Colonel Thomas Carney, Undersheriff
Executive Director John Curry, Department of Administration
Inspector General Martin Rahinsky, Dept. of Professional Standards
Director William MacDonald, Bureau of Finance and Budget
Elijah Williams, Assistant Director, Department of Legal Affairs
Employee Personnel File

ROWARD SHERIFF'S OFF.

CHANGE OF EMPLOYEE INFORMATION

NAME: Daniel Acosta

CCN: 10185

JOB TITLE: DEPUTY SHERIFF

CURRENT ASSIGNMENT: DISTRICT XI D.L.E

CHECK APPROPRIATE BOXES:

- NAME CHANGE (ATTACH SUPPORTING DOCUMENTATION)
- ADDRESS CHANGE
- TELEPHONE NUMBER CHANGE
- MARITAL STATUS CHANGE

RECEIVED

AUG - 2 2000

REVISED PERSONAL INFORMATION:

HUMAN RESOURCES

NAME: _____

STREET ADDRESS: _____

CITY, STATE: _____

ZIP CODE: _____

TELEPHONE NUMBER: _____

I hereby authorize release of the above to BSO department/divisions requiring this information.

[Signature] 10185
SIGNATURE / CCN

7/26/2000
DATE

DISTRIBUTION:
White copy to Personnel
Green to District/Division
Yellow to Communications
Goldenrod to Employee

08/02/2000
17:49:13

Broward County Sheriff's Office
PERSONNEL ROSTER CARD

PAGE 1
pmacthis

**** Current Status ****

Emp #: 010185 3455 DAHEL ACOSTA
S.S. [REDACTED]

Stat: A Pos#: 021298
BU: PBA GRST: 15 -01
296 DEPUTY SHE
23455 POMPANO BE

Hire : 05/30/2000
Birth: [REDACTED] Rate: 15.8558 Per-Sal: 1,268.46 Ann-Sal: 32,979.96
Perm : 05/30/2000

**** Action History ****

From: 01/01/1900 To: 12/31/9999

Date	Loc	Civ	BU	Pos #	Org	GRST	Rate	Per-Sal	Ann-Sal
05/19/00				00000		00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			
05/30/00				00000		00	0.0000	0.00	0.00
Action: NEW HIRE		Reason:		Title:		Job Desc??			

06/05/2000
11:53:44

Broward County Sheriff's Office
PERSONNEL ROSTER CARD

PAGE 1
pmacthis

**** Current Status ****

Emp #: 010185 3455 DAHEL ACOSTA Stat: A Pos#: 021298
S.S.#: [REDACTED] BU: PBA GRST: 15 -01
296 DEPUTY SHE
23455 POMPANO BE
Hire : 05/30/2000 Rate: 15.8558 Per-Sal: 1,268.46 Ann-Sal: 32,979.96
Birth: [REDACTED]
Perm : 05/30/2000

**** Action History ****

From: 01/01/1900 To: 12/31/9999

Date	Loc	Civ	BU	Pos #	Org	GRST	Rate	Per-Sal	Ann-Sal
05/19/00				00000		00	0.0000	0.00	0.00
Action: NEW HIRE				Reason:			Title:		Job Desc??
05/30/00				00000		00	0.0000	0.00	0.00
Action: NEW HIRE				Reason:			Title:		Job Desc??

10/05/1998	10/09/1998	03-1998-047-4	Investigative Interview	P	40
10/19/1998	10/30/1998	03-1998-019-5	Criminal Law	P	40
10/04/1999	10/14/1999	44-1999-093-3	Hostage Negotiations	P	40
11/08/1999	11/18/1999	44-1999-016-5	Narcotics Identification And Investigation	P	40

Dahel J Acosta [REDACTED]

10185

MT

2 B/105
1846
12308

05/31/2000

Florida Department of Law Enforcement

Criminal Justice Professionalism Program

Officer Profile Sheet

Name : Dahel J Acosta			
Race : His	Sex : M	Birthdate [REDACTED]	Education :

Employment							
Agency	Class	Type	Start Date	Sep. Date	Sep. Reason	TEA	FP Date
FL013045C Everglades Correctional Institution	Corr	FT	08/02/1996	03/26/1998	Voluntary Separation (Not involving misconduct)	N	10/01/1996
FL0060000 Broward County Sheriff's Office	Corr	FT	03/30/1998	11/26/1998	Voluntary Separation (Not involving misconduct)	N	05/11/1998
FL0500100 Belle Glade Police Department	LE	FT	11/25/1998	05/25/2000	Voluntary Separation (Not involving misconduct)	N	02/13/1999

Salary Incentive			
Basic LE	Career Dev.	Education	Maximum Eligible
\$0	\$0	\$0	\$0

Certification					
Type	Number	Status	Cert. Date	Man. Retr. Due Date	Mand. Retr. Comp. Date
Corr	167435	Inactive Employment	10/01/1996	06/30/2001	
LE	186294	Inactive Employment	07/21/1999	06/30/2004	

Exam									
Exam_Type	Exam Date	Form	Part 1	Part 2	Part 3	Part 4	Part 5	Overall	Amended
Corr	01/24/1996	1	Pass	Pass	Pass	Pass	Pass	Pass	
LE	07/30/1997	1	Pass	Pass	Pass	Pass	Pass	Pass	

Training					
Start Date	End Date	Sequence	Title	Grade	Hours Taught
08/28/1995	12/15/1995	30-1995-502-2	Certificate Of Compliance-Correctional	P	480
02/24/1997	06/24/1997	03-1997-222-1	Cross-Training-Corrections To Law Enforcement	P	324

Name Acosta, Dabel SS [REDACTED]

Cadet FL Certified OOS Certified Initial Application Received By KM Date Received 12-15-99

INITIAL APPLICATION REVIEW

CONTROLLED SUBSTANCES:

Within Standards Outside Standards Inactivation Code _____ Reapply Date _____

CRIMINAL HISTORY:

Within Standards Outside Standards Disposition Attached Disposition Requested Date Requested _____
Inactivation Code _____ Reapply Date _____ Comments _____

FLORIDA CERTIFICATION OR STATE TEST SCORES: Attached In Process Not Applicable (Cadet)

TABE SCORES: P / F _____ BASIC MOTOR SKILLS TEST: P / F Not Applicable SWIM TEST: P / F _____

DRIVING HISTORY:

Attached Advised to Request Within Standards Outside Standards Reapply Date _____

PRE-SCREEN INTERVIEW

Scheduled Date _____ Scheduled Time _____ Pre-Screener _____
Within Standards Disposition Requested Outside Standards Inactivation Code _____
Reapply Date _____ Comments _____
Advised Applicant About Inconsistency Yes Not Applicable
Background Investigation Needed at this Stage? No Yes Reason _____

EMPLOYMENT QUESTIONNAIRE

Date Given 2-10-00 Date Received 2-14-00 Received/Reviewed By [Signature] 5/00

CONTROLLED SUBSTANCES:

Within Standards Outside Standards Inactivation Code _____ Reapply Date _____

CRIMINAL HISTORY:

Within Standards Outside Standards Disposition Attached Disposition Requested Date Requested _____
Inactivation Code _____ Reapply Date _____ Comments _____

COMPLETION: Complete Incomplete (Note Below Information/Documents Applicant Needs for Completion)

Needs _____ Date Advised _____ Date Received _____
Needs _____ Date Advised _____ Date Received _____
Needs _____ Date Advised _____ Date Received _____

Name: _____ SSN: _____ POLYGRAPH EXAMINATION

Scheduled Date 2-25-00 3-13-00 (desched) Scheduled Time 9:00 AM Polygraphist Hoffman

No Deception Indicated Deception Indicated _____ Disqualified Admissions _____ Retest _____

Standards Outside Standards _____ Score 2 Report Scored By E. K. Hulse

Inactivation Code _____ Reapply Date _____ Comment _____

DRUG/MEDICAL EXAMINATION - Sunshine Medical Center

DRUG: Scheduled Exam Date 3-30-00 Negative Positive _____ Received Date 4-3-00

MEDICAL: Scheduled Exam Date 3-30-00 Time _____ Pass Fail _____ Received Date 4-3-00

PSYCHOLOGICAL EVALUATION

WRITTEN/BATTERY: Scheduled Date 3-23-00 Scheduled Time 9:00 AM Location _____

CLINICAL/INTERVIEW: Scheduled Date 3-24-00 Scheduled Time _____ Dr. Bryan

Verbal Date 3-29-00 Score 5 Comment _____

Report Received Date 4-5-00 Score 5 Comment _____

Recommended Not Recommended _____ Inactivation Code _____ Comment _____

Eligibility Only @ 18 wkl **BACKGROUND INVESTIGATION**

Date File Sent 4-5-00 Assigned Investigator SA Fitzgerald Date Assigned 4/2/00 / 4/12/00

NCIC Date Sent/Received 4-10-00 / 4-10-00 Docketrac Date Sent/Received 4-7-00 / 4-10-00

Recommended Yes _____ No _____ Current Employer Contacted Yes _____ No _____ Investigator FITZGERALD /Date 05/20/00

Final Review Date 05/20/00 Reviewed By [Signature] Comment _____
2-1-01 total

APPLICANT FILE REVIEW

DCR/DCP DIRECTOR:
Date File Sent 5-11-00 Reviewed By R. SHAW Date Reviewed 5-11-00 Personnel Received Date 5-11-00

Selected for Hire Comments _____

Not Selected for Hire _____ Applicant not selected for hire for the following reason(s):

HUMAN RESOURCES DIVISION:

Date File Sent _____ Reviewed By E. K. Hulse Date Reviewed 5-16-00 Received Date _____

Approved Disapproved _____ Inactivation Code _____ Reapply Date _____ Comments _____

CLASSIFICATION/PAY/HIRING INFORMATION

Hire Date 5/30/00 CCN 10185 Vacancy # T.B.A Budget Code 3110

Full Time Part Time _____ Hours/Shift _____ Salary Range 10/01

Revised April 30, 1998 H:\DOCSVA&R\FORMS\FACESHE2.DOC 15

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.

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 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 projected total tax for 2000. Get Pub. 919 especially if you used the Two-Earner/Two-Job Worksheet on page 2 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 (Keep for your records.)

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

B Enter "1" if:
 • 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 (or the total of both) are \$1,000 or less. B _____

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.) C _____

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

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

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

G **Child Tax Credit:**
 • If your total income will be between \$18,000 and \$50,000 (\$23,000 and \$63,000 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 G _____

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. ▶ H _____

For accuracy, complete all worksheets that apply.
 • If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the Deductions and Adjustments Worksheet on page 2.
 • If you are single, have more than one job and your combined earnings from all jobs exceed \$34,000, OR if you are married and have a working spouse or more than one job and the combined earnings from all jobs exceed \$60,000, see the Two-Earner/Two-Job Worksheet on page 2 to avoid having too little tax withheld.
 • If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form W-4 below.

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

Form W-4 Department of the Treasury Internal Revenue Service	Employee's Withholding Allowance Certificate	OMB No. 1545-0010 2000
▶ For Privacy Act and Paperwork Reduction Act Notice, see page 2.		
1 Type or print your first name and middle initial DAHEL J.	Last name ACOSTA	Employer's number [REDACTED]
Home address (number and street or rural route) [REDACTED]	3 <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note: If married, but legally separated, or spouse is a nonresident alien, check the Single box.	
City or town, state, and ZIP code [REDACTED]	4 If your last name differs from that on your social security card, check here. You must call 1-800-772-1213 for a new card <input type="checkbox"/>	
5 Total number of allowances you are claiming (from line H above OR from the applicable worksheet on page 2)	6 Additional amount, if any, you want withheld from each paycheck \$	5 <u>01</u> 6 \$
7 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 ▶ <u>7</u>		
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 [Signature]	Date ▶ May 30, 2000	
Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)	9 Office code (optional)	10 Employer identification number

Broward County Sheriff's Office
2601 West Broward Boulevard
Fort Lauderdale, FL 33312
(54) 831-8900



May 18, 2000

Mr. Dahel Acosta
[REDACTED]

Dear Mr. Acosta:

The Broward County Sheriff's Office would like to congratulate you for successfully completing the selection process for the position of **Deputy Sheriff Florida Certified**. Please accept this letter as confirmation regarding employment with Broward Sheriff's Office. You were offered and accepted employment with our agency as a **Deputy Sheriff Florida Certified** earning an annual salary of \$32,500 (Grade 15, Step 01). Your first day of work will be an orientation process and will begin at **8:00 A.M. sharp** on Tuesday, 05/30/2000. Please report to the following address:

**Broward County Sheriff's Office
Ron Cochran Public Safety Complex
2601 West Broward Boulevard, Personnel Office
Fort Lauderdale, Florida 33312
(954) 321-4400**

You will be with the Human Resources staff all day on the day of your Orientation. You will be required to complete all of your insurance paperwork at that time. Please be prepared to choose a family physician and pediatrician at that time. Please bring the dates of birth and social security numbers of all of your dependents. A birth certificate is required if your dependent has a different last name than you. If you have any questions or need additional information before your orientation, please call 321-4409 or 831-8355.

You must bring proper identification which includes your drivers license or state identification card and social security card. Please keep in mind this orientation will be your first day of work, therefore we ask that you dress in proper business attire.

Congratulations! We look forward to seeing you and please call if you need further information.

Sincerely,

Diana M. Viscarra, Recruitment and Assessment Manager
Human Resources Bureau

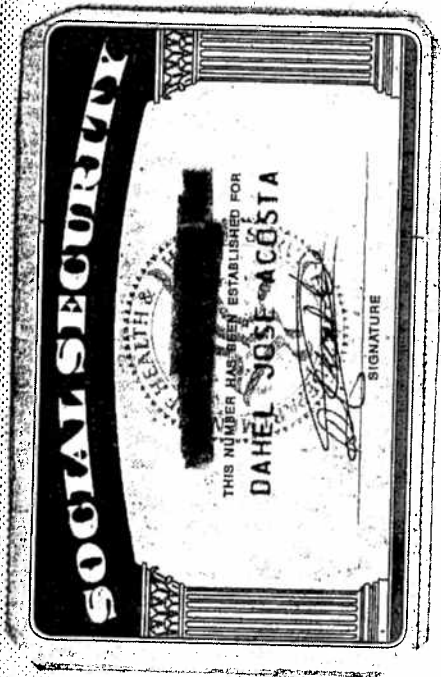
cc: file
g:\notices\hired.wpn

RECEIVED
FEB 14 2000
HUMAN RESOURCES

The Sunshine State
LICENSE NUMBER
DANIEL JOSE ACOSTA
ENDORSE
ISSUED 04-18-86
DUPLICATE 01-23-88
SAFE DRIVER
CDL CLASS B
Florida
TD-480720008
Operation of a motor vehicle constitutes consent to any sobriety test required by law.

*D. L. Address will be change to current
Address on 02/15/2000.*

**ORIGINAL
APPROVED**



**ORIGINAL
APPROVED**

R E C E I V E D
JAN 14 2000
HUMAN RESOURCES

Florida CDL CLASS B

The Sunshine State

LICENSE NUMBER [REDACTED]

DAHEL JOSE ACOSTA

[REDACTED]

BIRTH DATE	SEX	HGT.	REST.	ENDORSE
[REDACTED]	M	6-11		

ISSUED **04-18-95**

EXPIRES [REDACTED]

DUPLICATE **02-15-00**

[Signature]

P060002150070

SAFE DRIVER

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

Deputy Sheriff (CERTIFY)

HUMAN RESOURCES

RECEIVED

FEB 17 2001

POLICE DEPARTMENT

City of Belle Glade

40 WEST CANAL STREET, SOUTH

Phone 996-7251

BELLE GLADE, FLORIDA 33430



MICHAEL R. MILLER
Director of Public Safety

LOUIS L. LOWERY
Inspector of Police

MEMORANDUM

TO: All Personnel

FROM: Michael R. Miller, Director of Public Safety/Chief of Police *MM*

DATE: November 2, 1999

SUBJ: Nominations for "Police Officer of the Month"

Be
Gla
off. of
Mon

Please be advised that the below listed personnel have been nominated for Police Officer of the Month for the month of September 1999.

- Blanca Arciola
- Dahel Acosta
- Greg Burrus
- Jason Redd
- John Owens
- Helen Lowell/Paula Price
- Steven Sawyer
- Jeffers Walker

MRM:hsl

POLICE DEPARTMENT

City of Belle Glade

40 WEST CANAL STREET, SOUTH

Phone 996-7251

BELLE GLADE, FLORIDA 33430



MICHAEL R. MILLER
Director of Public Safety

LOUIS L. LOWERY
Inspector of Police

MEMORANDUM

TO: All Personnel

FROM: Michael R. Miller, Director of Public Safety/Chief of Police ~~MRM~~

DATE: September 27, 1999

SUBJ: Nominations for "Police Officer of the Month"

Please be advised that the below listed personnel have been nominated for "Police Officer of the Month" for the month of August 1999.

Police Officer Gregg Burrus
Police Officer Thomas Juric
Police Officer Steve Sawyers
Police Officer Harold Seiler
Detective Shatara Shatara
Police Officer Dahel Acosta
Detective Jason Redd

MRM:hsl

POLICE DEPARTMENT

City of Belle Glade

40 WEST CANAL STREET, SOUTH
Phone 996-7251
BELLE GLADE, FLORIDA 33430




MICHAEL R. MILLER
Director of Public Safety

LOUIS L. LOWERY
Inspector of Police

LETTER OF COMMENDATION

TO: Sergeant Jeffers Walker
Detective Jason Redd
Police Officer Dahel Acosta
Police Officer Greg Burrus
Police Officer Steve Sawyers

FROM: Michael R. Miller, Director of Public Safety/Chief of Police 

DATE: October 5, 1999

SUBJ: Letter of Commendation

I would like to take this opportunity to commend the above named personnel and supervisor for their actions occurring on September 20, 1999, in reference to the arrest of two (2) wanted felons out of the state of Georgia.

This is in keeping with the highest professional standards of the police service and reflects favorably upon you and the department.

Congratulations on a job well done!

MRM:hsl
Cc: City Manager
Personnel Files

HIGH SCHOOL EQUIVALENCY DIPLOMA TRANSCRIPT

A High School Equivalency Diploma is awarded by the New York State Education Department to any candidate who meets the requirements listed on the reverse side of this form. The test scores that enabled you to qualify for a New York State High School Equivalency Diploma are listed below. Your diploma number and the date that it was issued are provided below at the right.

Name of Test	Test No.	Test Score
Writing Skills	1	51
Social Studies	2	52
Science	3	50
Interpreting Literature & the Arts	4	56
Mathematics	5	50
Total		259

SPANISH EDITION GED TESTS
Diploma No. [REDACTED]
Date Issued [REDACTED]
ID Number [REDACTED]
Date of Birth [REDACTED]
ESL TEST: PASSED

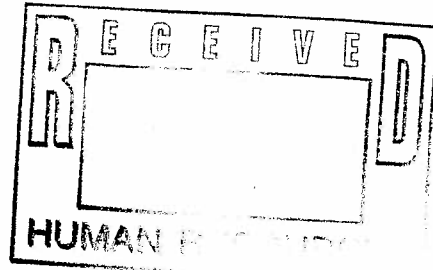
DAHEL J ACOSTA

127 57TH ST

BK

NY 11220

**ORIGINAL
APPROVED**



University of the
Education



The
State of New York
Department

Be it known that

DAHEL J ACOSTA

*having satisfactorily completed the requirements prescribed by
the Commissioner of Education is thereby entitled to this*

High School Equivalency Diploma



W009318

*In Witness Whereof the Regents issue this diploma
under seal of the University at Albany in*

MAY 1992

Thomas S. [Signature]
President of the University
and Commissioner of Education

**ORIGINAL
APPROVED**

U.S. PATENT NO'S
4272720 4210346
4265469 4341404
4310180 4351547
4277119

VA 115 250M (6/97) P.O. NO. M802775

DOCUMENT NO. G 9021931

5203

THE CITY OF NEW YORK
DEPARTMENT OF HEALTH
VITAL RECORDS
CERTIFICATION OF BIRTH

This is a certification of name and birth facts on file in the Bureau of Vital Records, Department of Health, City of New York.

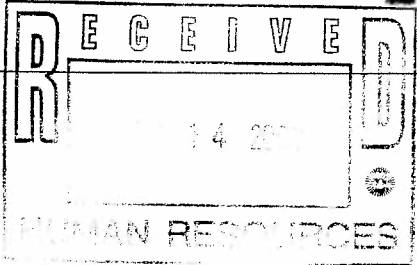
DATE OF BIRTH: [REDACTED] CERTIFICATE NO. [REDACTED]
BOROUGH: [REDACTED] DISTRICT: [REDACTED]
NAME: DAHEL JOSE ACOSTA***
SEX: MALE
MOTHER'S MAIDEN NAME: [REDACTED]
FATHER'S NAME: [REDACTED]

Do not accept this transcript unless it bears the raised seal of the Department of Health. The reproduction or alteration of this certification is prohibited by Section 3:21 of the New York City Health Code.

Steven P. Schwartz
STEVEN P. SCHWARTZ
CITY REGISTRAR



11218683



STATE OF FLORIDA
DEPARTMENT OF CORRECTIONS
Everglades C.I.
1601 S.W. 187th Avenue
Miami, FL 33185

TO: Whom It May Concern

FROM: Sgt. E. Hardee

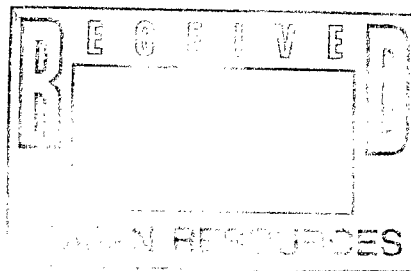
DATE: 9/19/97

SUBJECT: Officer Acosta, Dahel

This letter is to acknowledge Ofc. Acosta performance while under my supervision. Ofc. Acosta has always been very diligent, tactful and professional in the performance of his duties. Ofc. Acosta is without a doubt an asset to this organization. I recommend Ofc. Acosta to you without reservations.

Rec

Thank You,



Sgt. E. Hardee

Sgt. E. Hardee



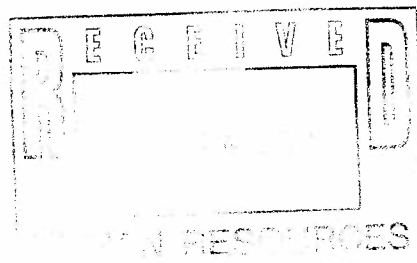
DATE: November 25, 1998

MEMO TO: Donna Stone, Superintendent via chain of command
Division of Community Correction

FROM: Sergeant G. Colt
Division of Community Corrections

SUBJECT: Letter of Accommodation for Deputy D. Acosta, # 8818

I would like to take this opportunity to accommodate Dep. Acosta for his performance. In the time that I have observed Dep. Acosta's work habits, I have found him to be extremely professional and conscientious. His previous experience, training and background is reflected in his daily duties. He is always punctual and prepared for any situation encountered during his tour of duty. Dep. Acosta has also displayed excellent interpersonal communication skills when dealing with civilians, and is highly regarded by his co-workers for his friendly nature. I believe he is an excellent Deputy and will be greatly missed by his current supervisors.



Memo

To: WHOM IT MAY CONCERN

From: SERGEANT DARREN P. READ *Sgt D.P. Read 307*

Date: FEBRUARY 12, 2000

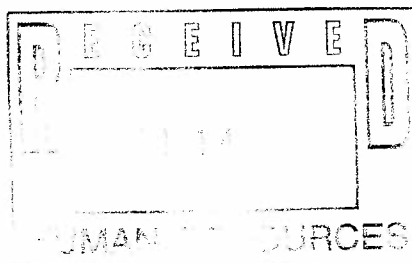
Re: LETTER OF REFERENCE / DAHEL ACOSTA

I HAVE WORKED WITH OFFICER DAHEL ACOSTA A TOTAL OF FOURTEEN MONTHS AND DURING THIS PERIOD HIS SERGEANT FOR FIVE MONTHS.

I HAVE WITNESSED AND SUPERVISED OFFICER ACOSTA ON A VARIETY OF CALLS, SEVERAL HIGH STRESS AND DANGEROUS SITUATIONS WHERE HE PERFORMED QUICKLY AND EFFICIENTLY. OFFICER ACOSTA IS WILLING TO LEARN DIFFERENT TOOLS AND TECHNIQUES TO COMPLETE HIS JOB IN AN EFFICIENT AND TIMELY MANNER. ACOSTA IS VERY FRIENDLY TO THE PUBLIC AND WORKS WELL WITH OTHER DEPARTMENT PERSONNEL.

OFFICER ACOSTA IS PUNCTUAL, RELIABLE AND WILLING TO WORK OVER OR COME IN EARLY IF THE INCOMING OR OFF GOING SHIFT IS SHORT.

OFFICER ACOSTA'S PERFORMANCE, WORK HABITS AND PROFESSIONAL ATTITUDE MAKES HIM AND ASSET IN ANY DEPARTMENT HE IS OR WILL BE EMPLOYED AT DURING HIS CAREER.



Jeb Bush
JEB BUSH
GOVERNOR

James T. Moore
JAMES T. MOORE, COMMISSIONER
FLORIDA DEPARTMENT OF
LAW ENFORCEMENT

STATE OF FLORIDA

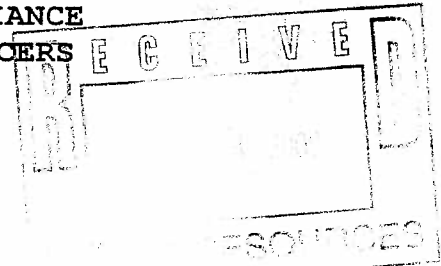
**THE COMMISSION ON
CRIMINAL JUSTICE STANDARDS
AND TRAINING**

Hereby awards to

**ORIGINAL
APPROVED**

DAHEL J ACOSTA

CROSS-TRAINING-CORRECTIONS TO LAW ENFORCEMENT
CERTIFICATE OF COMPLIANCE
LAW ENFORCEMENT OFFICERS
324 HOURS



For having fulfilled the requirements for training
as prescribed in Chapter 943
of Florida Statutes

Richard C Coffey
RICHARD C. COFFEY, CHAIRMAN
CRIMINAL JUSTICE STANDARDS
AND TRAINING COMMISSION

A. Leon Lowry, II
A. LEON LOWRY, II, PROGRAM DIRECTOR
CRIMINAL JUSTICE
PROFESSIONALISM SERVICES

July 21, 1999

186294

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
OFFICIAL GRADE NOTIFICATION



Exam Administration Number 97-026 - Exam Date 7/30/97

School: 139903 Broward Community College

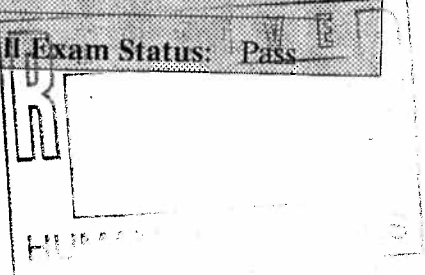
DAHEL J ACOSTA

SSN: [REDACTED]
Discipline: LAW
ReTakeNo:
Form: LE ONE
Effective Date: 07301997

Section #	Raw Score	Percent Correct	Status
1	58	97%	Pass
2	58	97%	Pass
3	52	87%	Pass
4	56	93%	Pass
5	53	88%	Pass

Overall Exam Status: Pass

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APPROVED



FLORIDA OFFICER CERTIFICATION EXAMINATION

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

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

OR

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

OR

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

For inquiries relating to the exam, please call (904)922-5256. This number is monitored eight (8) hours per day by staff. A voice mail box will activate when staff is on the telephone or it is after the close of the business day. All messages received will be returned by the close of the same business day.

A new application must be submitted twenty-one days prior to your next requested examination date. Include a copy of this notice with your new application.

CRIMINAL JUSTICE INSTITUTE

BROWARD COMMUNITY COLLEGE

Certificate of Achievement

Dahel Jose Acosta

has successfully completed

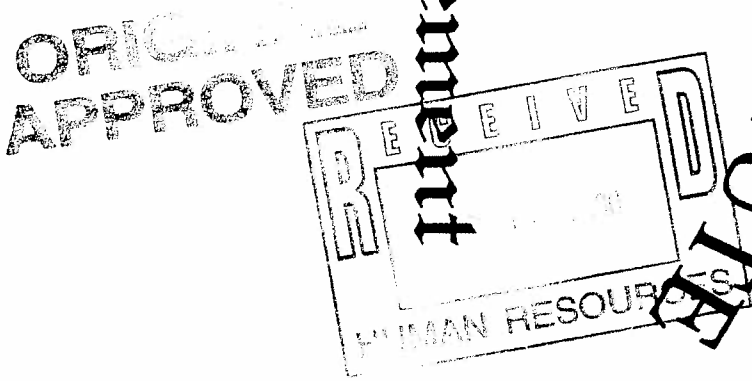
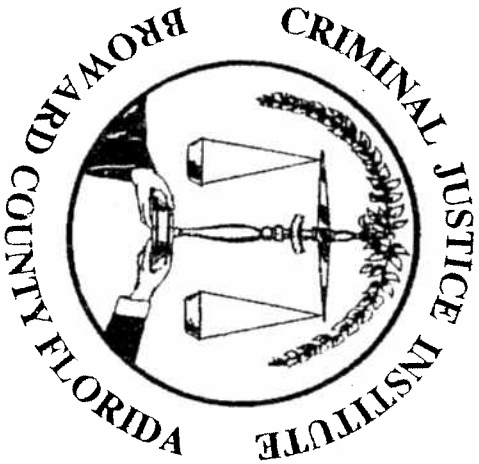
CROSS-OVER CORRECTIONS TO
LAW ENFORCEMENT ACADEMY #19

February 24, 1997 - June 24, 1997

(324 Hours)

Given this 24 day of June, 19 97


Director



Lawton Chiles
LAWTON CHILES
GOVERNOR

James T. Moore
JAMES T. MOORE, COMMISSIONER
FLORIDA DEPARTMENT OF
LAW ENFORCEMENT

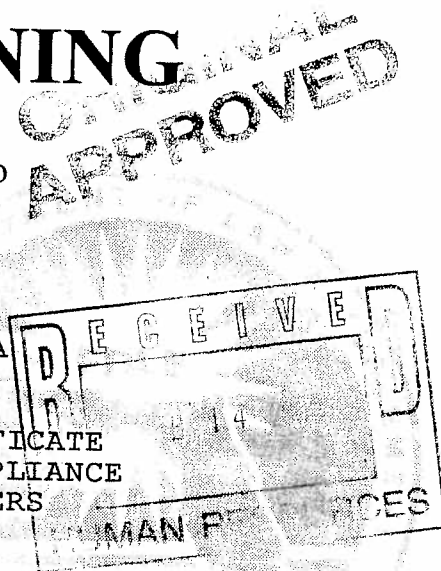
STATE OF FLORIDA

**THE COMMISSION ON
CRIMINAL JUSTICE STANDARDS
AND TRAINING**

Hereby awards to

DAHEL J. ACOSTA

BASIC RECRUIT CERTIFICATE
CERTIFICATE OF COMPLIANCE
CORRECTIONAL OFFICERS
480 HOURS



For having fulfilled the requirements for training
as prescribed in Chapter 943
of Florida Statutes

William A. Liquori
WILLIAM A. LIQUORI, CHAIRMAN
CRIMINAL JUSTICE STANDARDS
AND TRAINING COMMISSION
October 1, 1996

A. Leon Lowry II
A. LEON LOWRY II, DIRECTOR
DIVISION OF CRIMINAL JUSTICE
STANDARDS AND TRAINING
167435



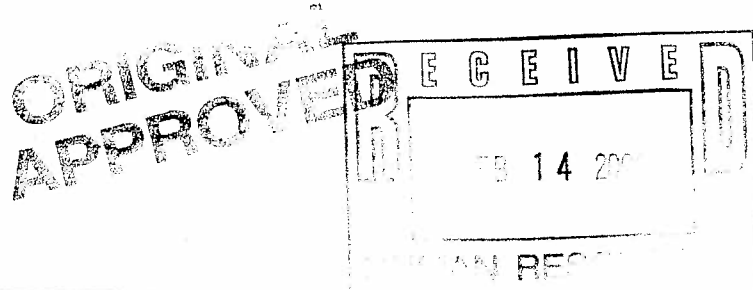
Florida Department of Law Enforcement - Tallahassee
 CO FORM 1 EFF. 1/17/96
 EXAM 96-002 DATE 1/24/96



Student Name: ACOSTA, DAHEL J
 Student ID #: [REDACTED]
 School Code: 079930"

Individual Student Report

Test #	Raw Score	Percent Correct	Pass/Fail
1	46	92%	Pass
2	47	94%	Pass
3	48	96%	Pass
4	48	96%	Pass
5	42	84%	Pass
=====			
Overall Test Status:			Pass



CRIMINAL JUSTICE STANDARDS AND TRAINING COMMISSION

This report serves as your official grade notification of the results of your
FLORIDA OFFICER CERTIFICATION EXAMINATION

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

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

OR

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

OR

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

A new application must be submitted twenty-one days prior to your next requested exam date. Include a copy of this notice with your new application.

Seminole Community College

Hereby awards the

CORRECTIONS BASIC RECRUIT CERTIFICATE

480 HOURS

Certificate of Completion

to

Dahel J. Acosta

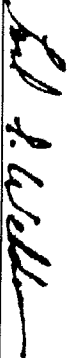
In witness whereof, we affix our signatures on this

15th

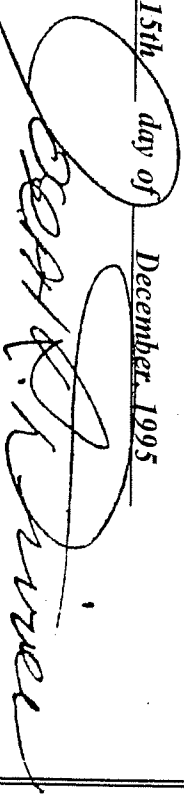
day of

December 1995

President

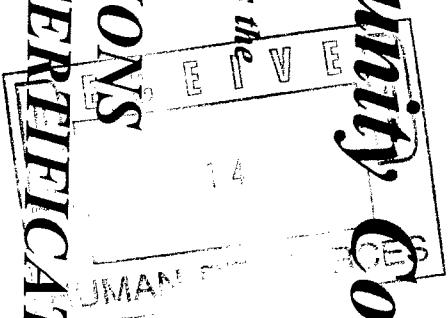


Training Center Director



S.S.

CJST 30-95-502-02



ORIGINAL
APPROVED

CRIMINAL JUSTICE INSTITUTE

BROWARD COMMUNITY COLLEGE

Certificate of Achievement

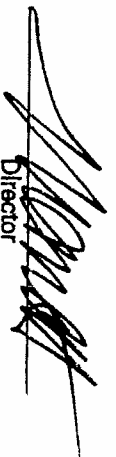
Dahel Jose Acosta

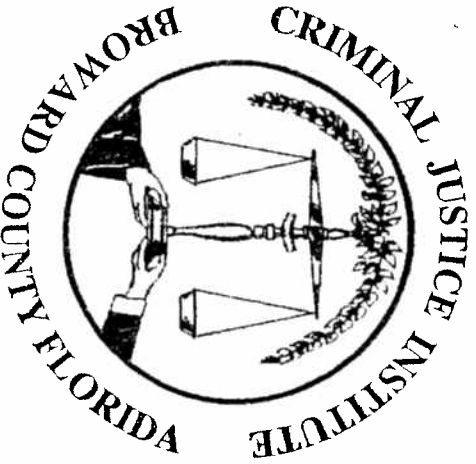
has successfully completed
Investigative Interviews

October 5-9, 1998
40 Hours

**OFFICIAL
APPROVED**

Given this 9th day of October, 1998


Director



CRIMINAL JUSTICE INSTITUTE

BROWARD COMMUNITY COLLEGE

Certificate of Achievement

Dahel Jose Acosta

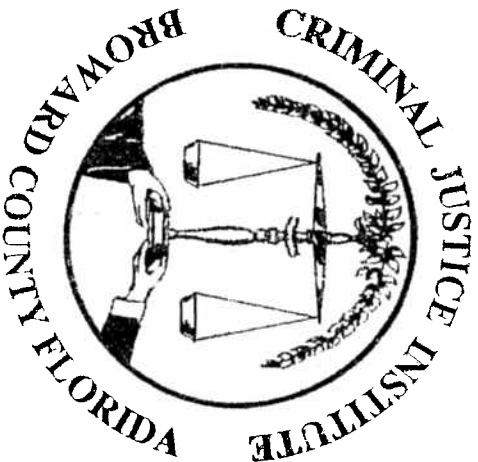
has successfully completed

Criminal Law

October 19-30, 1998

40 Hours

Onis
APPROVED



Given this 30th day of October, 1998


Director

Miami-Dade Community College

North Campus

ORIGINAL APPROVER



School of Justice and Safety Administration

On recommendation of its faculty and by virtue of the authority vested in it by the Board of Trustees of the College has awarded to

Deabel S. Abcosta

this certificate as evidence of the satisfactory attendance of the course in *Basic Report Writing Update for Criminal Justice Practitioners - 16 Hours*

given in the County of Dade, in the State of Florida on the *31st* day of *October* 1997

Carole V. Berglund
President, Miami-Dade Community College, North Campus



Annasylvia Jagers
Interim Director, School of Justice and Safety Administration

Certificate of Award

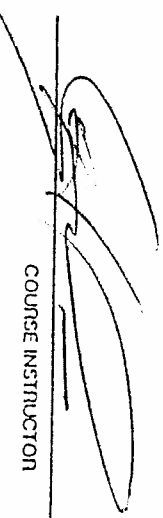
THIS CERTIFICATE IS APPROVED



DAHEL J. ACOSTA

has successfully completed the basic factory approved course for law enforcement according to guidelines as set forth & mandated by Stun Tech Inc. for use of the ALTRON II, Nova XR-5000 & Nova Spirit hand-held, non-lethal electronic immobilization devices.

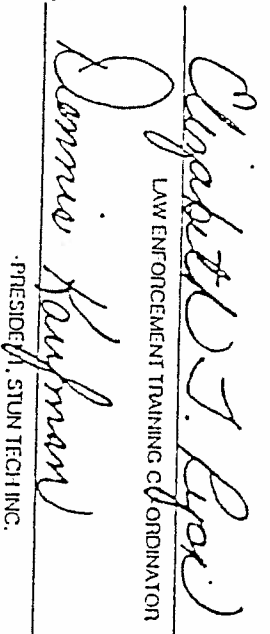
Awarded this 26TH day of AUGUST, 1997


COURSE INSTRUCTOR

38031

CERTIFICATE NO.

STUN-TECH INC. LAW ENFORCEMENT TRAINING DIVISION • CLEVELAND • OHIO


LAW ENFORCEMENT TRAINING COORDINATOR
PRESIDENT, STUN TECH INC.

Barnstable County Sheriff's Office



CERTIFICATE OF COMPLETION

Presented to

Dahel J. Acosta

for attending

Special Duty Assignment Class

August 27, 1998

Major Tim Gillette

Major Tim Gillette, Commander
Training and Organizational Development Division

16 hours

**ORIGINAL
APPROVED**

Bernhard County Sheriff's Office



CERTIFICATE OF COMPLETION

Presented to

Dahel Acosta

for attending

Interpersonal Communication Skills
Department of Corrections and Rehabilitation
In Service Program
September 29- 30, 1998

ORIGINAL APPROVED

Major Tim Gillette, Commander
Training and Organizational Development Division

16 hours

Jeb Bush
JEB BUSH
GOVERNOR

James T. Moore
JAMES T. MOORE, COMMISSIONER
FLORIDA DEPARTMENT OF
LAW ENFORCEMENT

STATE OF FLORIDA

**THE COMMISSION ON
CRIMINAL JUSTICE STANDARDS
AND TRAINING**

Hereby awards to

DAHEL J ACOSTA

**CROSS-TRAINING-CORRECTIONS TO LAW ENFORCEMENT
CERTIFICATE OF COMPLIANCE
LAW ENFORCEMENT OFFICERS
324 HOURS**

For having fulfilled the requirements for training
as prescribed in Chapter 943
of Florida Statutes

Richard C Coffey
RICHARD C. COFFEY, CHAIRMAN
CRIMINAL JUSTICE STANDARDS
AND TRAINING COMMISSION

A. Leon Lowry, II
A. LEON LOWRY, II, PROGRAM DIRECTOR
CRIMINAL JUSTICE
PROFESSIONALISM SERVICES

July 21, 1999

186294



School: 139903 Broward Community College

DAHEL J ACOSTA



SSN: [Redacted]
Discipline: LAW
ReTakeNo:
Form: LE ONE
Effective Date: 07301997

Section #	Raw Score	Percent Correct	Status
1	58	97%	Pass
2	58	97%	Pass
3	52	87%	Pass
4	56	93%	Pass
5	53	88%	Pass
Overall Exam Status:			Pass

FLORIDA OFFICER CERTIFICATION EXAMINATION

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For inquiries relating to the exam, please call (904)922-5256. This number is monitored eight (8) hours per day by staff. A voice mail box will activate when staff is on the telephone or it is after the close of the business day. All messages received will be returned by the close of the same business day.

A new application must be submitted twenty-one days prior to your next requested examination date. Include a copy of this notice with your new application.

CRIMINAL JUSTICE INSTITUTE

BROWARD COMMUNITY COLLEGE

Certificate of Achievement

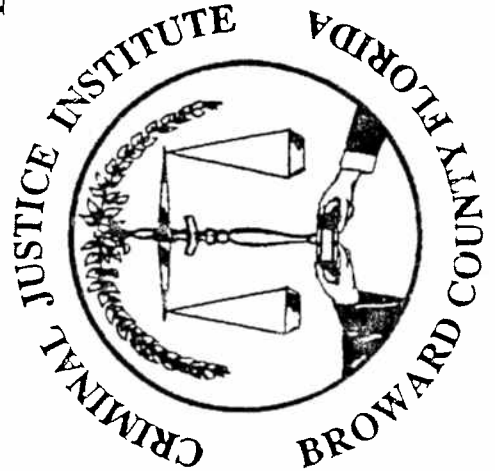
Dahel Jose Acosta

has successfully completed

CROSS-OVER CORRECTIONS TO
LAW ENFORCEMENT ACADEMY #19

February 24, 1997 - June 24, 1997
(324 Hours)

Given this 24 day of June, 19 97



[Signature]
Director



Student Name: ACOSTA, DAHEL J
 Student ID #: [REDACTED]
 School Code: 079930**

Individual Student Report

Test #	Raw Score	Percent Correct	Pass/Fail
1	46	92%	Pass
2	47	94%	Pass
3	48	96%	Pass
4	48	96%	Pass
5	42	84%	Pass
Overall Test Status:			Pass

**CRIMINAL JUSTICE STANDARDS AND TRAINING
 COMMISSION**

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Lawton Chiles
LAWTON CHILES
GOVERNOR

James T. Moore
JAMES T. MOORE, COMMISSIONER
FLORIDA DEPARTMENT OF
LAW ENFORCEMENT

STATE OF FLORIDA

**THE COMMISSION ON
CRIMINAL JUSTICE STANDARDS
AND TRAINING**

Hereby awards to

DAHEL J. ACOSTA

BASIC RECRUIT CERTIFICATE
CERTIFICATE OF COMPLIANCE
CORRECTIONAL OFFICERS
480 HOURS

For having fulfilled the requirements for training
as prescribed in Chapter 943
of Florida Statutes

William A. Liquori
WILLIAM A. LIQUORI, CHAIRMAN
CRIMINAL JUSTICE STANDARDS
AND TRAINING COMMISSION
October 1, 1996

A. Leon Lowry II
A. LEON LOWRY II, DIRECTOR
DIVISION OF CRIMINAL JUSTICE
STANDARDS AND TRAINING
167435

<CTRL-W> -- save/end
arrows -- position cursor
<Enter> -- move to next field

<ESC> -- abandon operation
<CTRL-Y> -- delete a field
<BACKSPACE> -- previous field

Date : 07/25/94

First Name : DAHEL M.I.: J Last Name : ACOSTA

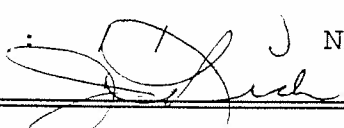
ALIAS:

FIRST NAME : Last Name :

SSN [REDACTED] DOB [REDACTED] CJTC# : 0-621-45

SEX : M Certified : Y RACE : H

TESTING INFORMATION

1st	08/15/94	9.0	8.6	8.2	PHYSICAL	12/13/99
TABE		READ	MATH	LANG		
2nd	01/05/95	12.1	12.9	10.4	SWIM	11/29/99
TEST % :	66.00	DATE :		ND :	.0	DATE : / /

DENISE BEAULIEU • MANAGER
CRIMINAL JUSTICE
TRAINING CENTER
3501 DAVIE ROAD, BLDG. 22
DAVIE, FL 33014-1093

HIGH SCHOOL EQUIVALENCY DIPLOMA TRANSCRIPT

A High School Equivalency Diploma is awarded by the New York State Education Department to any candidate who meets the requirements listed on the reverse side of this form. The test scores that enabled you to qualify for a New York State High School Equivalency Diploma are listed below. Your diploma number and the date that it was issued are provided below at the right.

<u>Name of Test</u>	<u>Test No.</u>	<u>Test Score</u>
Writing Skills	1	51
Social Studies	2	52
Science	3	50
Interpreting Literature & the Arts	4	56
Mathematics	5	50
Total		259

SPANISH EDITION GED TESTS
Diploma No. [REDACTED]
Date Issued [REDACTED]
ID Number [REDACTED]
Date of Birth [REDACTED]
ESL TEST: PASSED

DAHEL J ACOSTA

The University of the State of New York
Education Department



Be it known that

DAHEL J ACOSTA

*having satisfactorily completed the requirements prescribed by
the Commissioner of Education is thereby entitled to this*

High School Equivalency Diploma

*In Witness Whereof the Regents issue this diploma
under seal of the University at Albany in*

MAY 1992

Thomas S. [Signature]
President of the University
and Commissioner of Education



THE CITY OF NEW YORK
DEPARTMENT OF HEALTH
VITAL RECORDS
CERTIFICATION OF BIRTH

This is a certification of name and birth facts on file in the Bureau of Vital Records, Department of Health, City of New York.

DATE OF BIRTH [REDACTED] CERTIFICATE NO. [REDACTED]
BOROUGH [REDACTED] DATE FILED [REDACTED] DATE ISSUED 09-04-97

NAME: DAHEL JOSE ACOSTA***

SEX: MALE

MOTHER'S MAIDEN NAME: [REDACTED]

FATHER'S NAME: [REDACTED]

Steven P. Schwartz

STEVEN P. SCHWARTZ
CITY REGISTRAR



Do not accept this transcript unless it bears the raised seal of the Department of Health. The reproduction or alteration of this certification is prohibited by Section 3.21 of the New York City Health Code.

ROGIE GARCIA
DEC 13 1994

COMPLAINT/ARREST AFFIDAVIT

SHARPH

Case Number: 205040000
 Agency Code: 9372194, 43
 Municipal P.D. Def. ID No: 0472
 MDPD Records and ID No: [REDACTED]
 Court Case No: M9459787

Defendant Name: ACOSTA DAHEL JOSE
 DOB: [REDACTED]
 Sex: M, Race: W, Ethnicity: [REDACTED]
 Height: 5'20, Weight: 120, Hair: BLK, Eyes: BRN

Address: [REDACTED]
 Business Address: [REDACTED]
 Driver's License: [REDACTED]
 Occupation: STUDENT, Place of Birth: NEW YORK

Arrest Date: 11/30/94, Time: 4:45 P.M.
 Arrest Location: SR 997 & RATNER BRIDGE AREA 3B

Viol. Suspected history of drug involvement? [X] Yes
 Influence of Drugs: [X] No
 Influence of Alcohol: [X] No

DRUG ACTIVITY: S. Sell, B. Buy, P. Possess, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Dispense/Distribute, Z. Other, M. Manufacture/Produce/Cultivate

DRUG TYPE: N. N/A, A. Amphetamine, B. Barbiturate, C. Cocaine, E. Heroin, H. Hallucinogen, M. Marijuana, O. Opium/Derv, P. Paraphernalia/Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGES	Activity	Type	Counts	STATUTE	D.V.	VIOLATION OF SECT.
UNLAWFUL POSSESSION OF A GUN IN A WILDED WILDLIFE MANAGEMENT AREA	N	N	1	372-83	FAC	
				FAC 39-15.004(2)		

Subscribed and sworn to before me on this 30 day of NOV 19 94 at 4:45 P.M. at SR 997 & RATNER BRIDGE

Observed Defendant Discharging Firearm in a Closed Wildlife Management Area (Francis Taylor 3B) Defendant was in possession of a S&W Model S&W .38 S&W PAE 2500 and a Interarms 357 MAG. S&W PAE 2905. Gun Release Form signed by Defendant.

Signature of Defendant: SE A Colon
 Signature of Notary: [Signature]
 Notary Title: Deputy of the Court or Notary Public
 Court ID Number/Loc. Code: 0036 (43)

Sworn to and subscribed before me, the undersigned authority, this 7 day of Dec 1994

Hold for Bond Hearing? []
 I understand that should I willfully fail to appear before the court as required by this notice to appear that I may be held in contempt of court and a warrant for my arrest shall be issued. [X]

MARIA GARZA
FEB 11 1991

COMPLAINT/ARREST AFFIDAVIT

CHITS Number: 3427351, Police Case No: 62984-1, Court Case No: [blank]

Agency Code: 30, MDPD Records and ID No: [blank]

DEFENDANT'S NAME: ACOSTA, DAHEL JOSE, DOB: [redacted], Sex: M, Race: M, Height: 508, Weight: 190, Hair: BLK, Eyes: BRN

RESIDENCE ADDRESS: [redacted], Phone: NONE, Address Source: Verbal, Driver's License: [blank], Occupation: [blank], Place of Birth: N.Y.

DRIVER'S LICENSE NO: [redacted], State: [redacted], Social Security No: [redacted], Scars, Tattoos, Unique Physical Features: NONE

Arrest Date: 02/10/91, Arrest Time: 1155, Arrest Location: 72ST WEST 26TH (ROADWAY)

Influence of Drugs: Unknown, Influence of Alcohol: Unknown, Citizenship: US, Residence Type: City, Dade, Florida

DEFENDANT'S NAME: [redacted], DOB: [redacted], in Custody: [blank], Felony: [blank], Juvenile: [blank], At Large: [blank], Misdemeanor: [blank]

CODE	DRUG ACTIVITY	DRUG TYPE	VIOLATION OF SECT
1	Loitering & Prowlng	N N	21-81A

STATUTE: 856.021, CASE NUMBER: 91-54431

On the 7TH day of FEB 1991 at 1150 AM P.M. at 72ST WEST 26TH ROADWAY (Location include name of business)

WHILE ENROUTE TO WORK THIS OFC. OBSERVED DEF. RIDING HIS BICYCLE IN THE AREA OF 72ND AVENUE BETWEEN 26TH & 27TH (WEST HALEAH). THIS OFC. OBSERVED THE DEF. LOOKING INTO THE YARD OF SEVERAL RESIDENCES. DEF. OBSERVED THIS OFC. AND ATTEMPTED TO CONCEAL HIMSELF BETWEEN TWO VEH'S. THIS OFC. THEN WENT AROUND THE AREA UNTIL DEF. EXITED FROM BEHIND THE VEH'S DEF. THEN OBSERVED THIS OFFICER AND ATTEMPTED TO LEAVE THE AREA, THIS

Sworn to and subscribed before me, the undersigned authority this 7TH day of FEB 1991 at 5:33

Signature of Officer: FERNANDEZ, L. (Signature), MDPD 2138, Court ID Number/Loc Code: 21

Signature of Defendant: [Signature]

COMPLAINT/ARREST AFFIDAVIT
CONTINUATION

Number: _____ Jail No: 1327.0 Police Case No: 62984-L
 Felony Misdemeanor Traffic
 Juvenile Warrant
 IS No: _____ Agency Code: 30 Municipal P.D. Def ID No: _____ MOPD Records and ID No: _____ Court Case No: 91-54431

DEFENDANT'S NAME: ACOSTA, DAHEL JOSE DOB: 12/13/1972

ADDITIONAL CHARGES	Activity	Type	Counts	STATUTE	<input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> CIT *	VIOLATION OF SEC. OF THE CODE OF

D.F.C. CONFRONTED THE DEF. AND READ HIM HIS RIGHTS PER MIRANDA DEF. WAS ASKED WHAT HE WAS DOING IN THE AREA AT WHICH TIME HE REFUSED TO DISPEL THIS OFFICERS ALARM. NOTE THERE HAVE BEEN SEVERAL BULL-LARNS IN THE AREA WHERE THE DEF. WAS ARRESTED, BY SUBJECTS ON BICYCLES. DEF. ARRESTED AND TRANSPORTED TO D.D.C.

Sworn to and subscribed to by me, the undersigned authority, this 7th day of Feb, 19 91

 Deputy of the Court or Notary Public

Officer's Signature: FERNANDEZ, L
4000 2138 (21)
 Court IC Number/Loc Code

HOLD FOR BOND HEARING OR NOT BOND OUT. Officer Must Appear at Bond Hearing.
 I understand that should I willfully fail to appear before the courts as required by this notice to appear that I may be held in contempt of court and a warrant for my arrest shall be issued. Furthermore, I agree that notice concerning the time, date, and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court whenever notify Family Division/Juvenile Section anytime that my address changes.

I understand that should I willfully fail to appear before the courts as required by this notice to appear that I may be held in contempt of court and a warrant for my arrest shall be issued. Furthermore, I agree that notice concerning the time, date, and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court whenever notify Family Division/Juvenile Section anytime that my address changes.

You need not appear in court, but must comply with the instructions on the reverse side hereof.

5-3

STATE OF FLORIDA

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF DRIVER LICENSES TRANSCRIPT OF DRIVER LICENSE

DANIEL JOSE PINOIA
 FIRST MIDDLE OR MAIDEN LAST
 LINN WILHELM
 ADDRESS
 CITY, STATE, ZIP 04144
 DUPLICATE LICENSE: 0123456789
 REPLACEMENT LIC

12/30/74 DOB 08/05/30/74
 HEIGHT RACE SEX SOCIAL S
 CLASS DATE ISSUED DATE EXPIRED RESTRICTIONS
 1 1 0 0 11/00/

EXAMS VISION SIGNS RULES DRIVING MOT
 0123456789

CRASH/OFFENSE EFFECTIVE DATE	CONVICTION DATE	REINSTATEMENT DATE	INFORMATION FROM COUNTY/STATE	CITY	COURT	ENTRY
09/11/93				ORLANDO	CRASH	DMV - TEMPORARY DRIVING EXPIRES: 10/14/95 INVESTIGATED BY

IN COMPLIANCE WITH SECTION 322.201 F.S., I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT TRANSCRIPT OF THE SUBJECT'S DRIVER RECORD AS FURNISHED ME BY THE STATE OF FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES.

Robert E. Lockwood
 ROBERT E. LOCKWOOD
 CLERK, CIRCUIT & COUNTY COURTS
 BROWARD COUNTY, FLORIDA

NOTE: SOME LICENSES ISSUED BY THE STATE OF FLORIDA ARE VALID IN FLORIDA ONLY.
 THIS RESULTS FROM APPLICANT RETAINING A VALID LICENSE FROM ANOTHER JURISDICTION.
 *** THIS VIOLATION CANNOT BE USED TO SURCHARGE AN AUTOMOBILE LIABILITY INSURANCE POLICY. F.S. 626.9701

- LICENSE CLASSES
- CLASS A ANY TRACTOR-TRAILER WITH A GVWR OF 26,001 POUNDS OR MORE
 - CLASS B ANY SINGLE VEHICLE WITH A GVWR OF 26,001 POUNDS OR MORE
 - CLASS C ANY ENDORSED VEHICLE WITH A GVWR OF LESS THAN 26,001 POUNDS
 - CLASS D ANY SINGLE VEHICLE OF 8,000 POUNDS OR MORE, BUT LESS THAN 26,001 POUNDS GVWR OR MORE THAN 80 INCHES WIDE
 - CLASS E REGULAR OPERATOR'S LICENSE
 - CLASS E(L) LEARNER'S LICENSE

Broward County Sheriff's Office
2601 West Broward Boulevard
Fort Lauderdale, FL 33312
(954) 831-8900



February 23, 2000

Mr. Dahel Acosta
[REDACTED]

Dear Mr. Acosta:

The Broward Sheriff's Office is pleased to extend a conditional offer of employment to you for the position of **Deputy Sheriff Florida Certified**. This offer is specifically contingent upon your successful completion, to the satisfaction of the Broward Sheriff's Office, the following:

Polygraph Examination
Psychological Evaluation
Background Investigation
Medical Examination and Drug Test
Final review of your file

If you are presently employed, we strongly recommend that you not resign your present position until you are notified that you have successfully completed the requirements set forth above. Upon satisfactory completion of all pre-employment steps and contingent upon an available vacancy, you will be offered a position as a **Deputy Sheriff Florida Certified**, with a yearly salary of \$31,553 (Grade 15, Step 01). Should you be unable to begin employment on the designated date this conditional offer of employment shall be deemed to be revoked.

This offer shall be deemed to be revoked upon your failure to meet any of the requirements or conditions contained herein.

Sincerely,

Diana M. Viscarra, Recruitment and Assessment Manager
Human Resources Bureau

HS.WPN



BROWARD SHERIFF'S OFFICE
INITIAL APPLICATION FOR EMPLOYMENT

9922A

The Broward Sheriff's Office is an equal opportunity employer and does not discriminate on the basis of age, citizenship, intending citizenship status, color, disability, marital status, national origin, race, religion, sex, or sexual orientation.

RECEIVED
DEC 15 1999
HUMAN RESOURCES

BROWARD SHERIFF'S OFFICE COMPLETE APPLICATION DO NOT LEAVE ANY BLANKS PLEASE PRINT CLEARLY

Personnel Division
2601 West Broward Boulevard
Fort Lauderdale, Florida 33311
Position Applying for: DEPUTY SHERIFF CERTIFIED (99-2969)

Form with fields: Voice Phone, TDD Phone, Social Security Number, Date of Application, Last Name, First Name, Middle Initial, Mailing Address, City, State, Zip Code, Home Phone Number, Work Phone Number, Extension, Driver License #, State.

In accordance with the "Americans with Disabilities Act of 1991," the Broward County Sheriff's Office will reasonably accommodate qualified individuals with a disability.

1. DO YOU WISH TO CLAIM VETERAN'S PREFERENCE PER FLORIDA LAW?
2. Are you a U.S. Citizen or alien lawfully authorized to work in the U.S.?
3. Do you meet all of the minimum requirements stated on the job announcement for this position?

ENTERED

By signing this document, I certify that all of the information on this entire application is true and complete to the best of my knowledge. I understand that all information is subject to investigation and that omission, falsification, or misrepresentation is sufficient cause for rejection of this application...

Dahel Jose Acosta PRINT YOUR NAME
SIGN YOUR NAME
12/13/99 DATE
SOCIAL SECURITY #

BROWARD SHERIFF'S OFFICE CONTROLLED SUBSTANCE/CRIMINAL HISTORY QUESTIONNAIRE

1. Do you now illegally use any drugs or controlled substances or have you ever casually used (used but did not become addicted to) any drugs or controlled substances illegally in the past? [] Yes [x] No
“ever” means smoking; inhaling; swallowing; placing to gums, lips or tongue; injecting; or ingesting by any other means.
2. Do you now or have you ever illegally possessed, supplied, or sold any drugs or controlled substances? [] Yes [x] No

IF YOU ANSWERED YES TO QUESTIONS #1 AND/OR #2 ABOVE, PROVIDE ALL DETAILS BELOW:
You must include: Which drugs or controlled substances, type of activity (use or possession), number of times, first time (mo/yr), last time (mo/yr), etc.

Drug or Controlled Substance Used or Possessed	First Time Used (mo/yr)	Last Time Used (mo/yr)	Number of Times Used
Type of Activity/Explanation:			
Type of Activity/Explanation:			
Type of Activity/Explanation:			

CRIMINAL HISTORY RECORDS EXPUNCTION OR SEALING: A candidate for employment with a criminal justice agency such as the Broward Sheriff's Office may not lawfully deny or fail to acknowledge the events in any sealed or expunged criminal history records when the candidate is the subject of such records. (943.0585(4)(a)(1), 943.059 (4)(a)(1), Florida Statutes)

CONVICTIONS AND/OR FINDINGS THAT YOU DID COMMIT A VIOLATION OF THE LAW: Most convictions and/or findings that you did commit a violation of the law will not automatically exclude you from employment. The circumstances surrounding the convictions and/or findings are considered, such as: the nature, number severity, date of the offense, subsequent history, efforts at rehabilitation, and relation of the offense to the requirements of the position for which you applied.

3. Have you ever been arrested or detained by any law enforcement agency for any reason and at any time? [x] Yes [] No
includes arrests or detentions as a juvenile or for violations which were not prosecuted or where some type of pre-trial intervention was offered; and includes all arrests regardless of you plea, whether it was guilty or no contest, or not guilty.)
4. Have you ever been convicted of, or have you ever been found to have committed any civil or criminal law violations? [] Yes [x] No


IF YOU ANSWERED YES TO QUESTION #3 AND/OR QUESTION #4 ABOVE, PROVIDE ALL DETAILS BELOW:

- (1) List all detentions, arrests, convictions, and/or circumstances where you were found to have committed violations of civil and/or criminal law.
 (2) At the time of application, submit copies of existing documentation such as final disposition, court documents, arrest reports, etc. for each incident.


Charge/Law Violation/Circumstance:	Location:	Detention/Arrest/Disposition/Penalty:	Date (mo/day/yr):
Possession of a firearm in a close wildlife Management are.	Dade County	Charges Dismissed	11/30/94
Loitering	Dade County	Charges Dismissed	02/07/91

By signing this document, I certify that all of the information provided is true and complete to the best of my knowledge. I understand that all information is subject to investigation and that omission, falsification, or misrepresentation is sufficient cause for rejection of my application, removal of my name from any employment list, or dismissal from service. I understand that the Broward Sheriff's Office is a Drug-Free Workplace and that employees are subject to random drug testing.

 Daniel Jose Acosta
 PRINT YOUR NAME


 SIGN YOUR NAME

 12/13/99
 DATE


 SOCIAL SECURITY #

BROWARD COUNTY SHERIFF'S OFFICE EMPLOYMENT QUESTIONNAIRE



RECEIVED

HUMAN RESOURCES

The Broward County Sheriff's Office is an equal opportunity employer and does not discriminate on the basis of age, citizenship, intending citizenship status, color, disability, marital status, national origin, race, religion, sex, or sexual orientation.

These factors are NOT used as selection criteria, except in rare instances where such factors are bona fide occupational qualifications. This information may be used, however, for identification purposes in conducting a background investigation.

In accordance with the "Americans with Disabilities Act of 1991", the Broward County Sheriff's Office will reasonably accommodate qualified individuals with disabilities. If you are disabled and require accommodation, you may request it and the Broward Sheriff's Office will make every reasonable endeavor to provide it to you. However, some types of accommodations may require some preparation before they can be provided. Therefore, we suggest that you make such requests as early as possible by contacting the Personnel Division.

COMPLETE QUESTIONNAIRE Use additional sheets in the same format if necessary.

DO NOT LEAVE ANY BLANKS

Resumes may not substitute for any information requested on this questionnaire.
PLEASE PRINT CLEARLY

Position Applied for: **DEPUTY SHERIFF (Certify)**

Social Security Number		Date	
[REDACTED]		February 10, 2000	
Last Name	First Name	Middle Name	
Acosta	Dahel	Jose	
Mailing Address		City	State
[REDACTED]		[REDACTED]	[REDACTED]
Home Phone Number		Work Phone Number	Extension
[REDACTED]		[REDACTED]	16
Height	Weight	Color of Eyes	Color of Hair
5'11"	235	Brown	Black
Distinguishing marks, scars, &/or tattoos			
N/A			
Date of Birth (mo/day/yr)		Place of Birth	City
[REDACTED]		[REDACTED]	[REDACTED]

List all other names you have ever used that are different than your current name: If None, check here

Last Name	First Name	Middle Name	Reason	From (mo/yr)	To (mo/yr)
 					

Have you ever applied to the Broward Sheriff's Office before? Yes No

Position applied for	Date (mo/yr)	Outcome
Deputy Sheriff-Correc	03/98	Hired

Are you a present or previous employee of the Broward Sheriff's Office? yes No

Position	From (mo/yr)	To (mo/yr)	Reason for leaving
Deputy Sheriff-Correction	03/98	11/98	Accepted a position as a police officer

RESIDENCE (continue):

From (mo/yr)	To (mo/yr)	
08/93	08/95	[REDACTED]
05/93	08/93	[REDACTED]
03/93	05/93	[REDACTED]
01/93	03/93	[REDACTED]
03/90	01/93	[REDACTED]

EMPLOYMENT (continue):

From (mo/yr)	To (mo/yr)	
10/92	08/93	U.S. Navy, U.S. Naval Base Mayport, Mayport, FL. Position: Seamen, Supervisor: P/O Fisher, Reason for leaving: Honorable discharge.
04/92	08/92	In school.
08/91	04/92	Liman Enterprise, 5600-1st Ave., Brooklyn, FL 11220 position: Truck driver, Supervisor: Danny, Reason for leaving: Resigned, company relocated.

EMPLOYMENT: List all full and part-time paid work experience you have had in the past ten (10) years. Start with the most recent position and work back. Major changes in duties or job titles with the same employer should be listed as separate positions. Describe job duties in detail. Use additional sheets in the same format if necessary. Resumes may not substitute for any information requested on this questionnaire.

1. Most recent position							
From	To	Total Time		Hours	Title of Position	Name & Title of Supervisor	Reason for Leaving
Mo./Day/Yr.	Mo./Day/Yr.	Yrs.	Mths.	Per Week			
11/98	Present	01	03	40(+)	Police Officer, Sgt. Read		N/A
Employer		Address				Phone	
Belle Glade Police Department,		40 West Canal St. South, Belle Glade, FL 33430				561-996-7251	
Description of Duties: Enforcement of state, county and city laws and ordinances.							
Supervised (did subordinate Performance Evaluations) <input type="checkbox"/> Yes <input type="checkbox"/> No For Office Use							

BETWEEN THESE JOBS (if Applicable): Unemployed In School From(mo/day/yr): To(mo/day/yr):

2. Next most recent position							
From	To	Total Time		Hours	Title of Position	Name & Title of Supervisor	Reason for Leaving
Mo./Day/Yr.	Mo./Day/Yr.	Yrs.	Mths.	Per Week			
03/98	11/98		08	40(+)	Deputy Sheriff-Correction, Sgt. Colt,		Resigned, accepted employment with BCPD
Employer		Address				Phone	
Broward Sheriff's Office,		2601 W. Broward Blvd., Ft. Lauderdale, FL 33312				954-321-4400	
Description of Duties: Custody, care and control of inmates incarcerated in the broward county jails.							
Supervised (did subordinate Performance Evaluations) <input type="checkbox"/> Yes <input type="checkbox"/> No For Office Use							

BETWEEN THESE JOBS (if Applicable): Unemployed In School From(mo/day/yr): To(mo/day/yr):

3. Next most recent position							
From	To	Total Time		Hours	Title of Position	Name & Title of Supervisor	Reason for Leaving
Mo./Day/Yr.	Mo./Day/Yr.	Yrs.	Mths.	Per Week			
08/96	03/98	01	07	40(+)	Correctional Officer, Capt. Brothers,		Resigned, accepted employment with BSO
Employer		Address				Phone	
Fla. Dept. of Corrections,		E.C.I., 1601 S.W. 187th Ave. Miami, FL 33185				305-228-2000	
Description of Duties: Custody, care and control of inmates.							
Supervised (did subordinate Performance Evaluations) <input type="checkbox"/> Yes <input type="checkbox"/> No For Office Use							

BETWEEN THESE JOBS (if Applicable): Unemployed In School From(mo/day/yr): To(mo/day/yr):

4. Next most recent position							
From	To	Total Time		Hours	Title of Position	Name & Title of Supervisor	Reason for Leaving
Mo./Day/Yr.	Mo./Day/Yr.	Yrs.	Mths.	Per Week			
06/96	08/96		02	40	Security Agent, Mr. Cevera,		Resigned, accepted employment with DOC.
Employer		Address				Phone	
Fisher Island,		1-Fisher Island Dr., Miami, FL 33139				305-535-6069	
Description of Duties: Maintained security in a private community, responded to alarms and emergencies.							
Supervised (did subordinate Performance Evaluations) <input type="checkbox"/> Yes <input type="checkbox"/> No For Office Use							

- 1. Have you ever been dismissed from any employment? Yes No
- 2. Have you ever been asked to resign from any employment? Yes No
- 3. Have you ever resigned from any employment following allegations of misconduct? Yes No
- 4. Have you ever resigned from any employment following allegations of unsatisfactory performance? Yes No
- 5. Have you ever left a job by mutual agreement following unfavorable conditions or circumstances? Yes No
- 6. Have you ever received an unsatisfactory evaluation from an employer? Yes No
- 7. Have you ever applied to any other law enforcement agency not listed as an employer? Yes No
- 8. Have you ever performed any service for any law enforcement agency not listed as an employer? Yes No
- 9. Are you an owner, partner, or corporate officer in any other business not listed as an employer? Yes No
- 10. Do you have any objections to having your current employer contacted? Yes No

IF YOU ANSWERED YES TO ANY OF THE QUESTIONS ABOVE, LIST THE QUESTION NUMBER AND PROVIDE ALL DETAILS BELOW:

Sweetwater Police Department (sponsorship only).
Miami Beach Police Department (none-active status).
Florida International University Police Department (none-active status).

ORGANIZATIONAL MEMBERSHIPS: List all professional, trade, and business organizations you have been involved with and positions held:

Organization Name:	City/State:	Position held:

LANDLORD: If you live in a rental unit, provide the name of the person or company to whom you pay rent.

Name: [REDACTED]	Phone Number: [REDACTED]
Address: Street, City, State, Zip Code [REDACTED]	

LAW ENFORCEMENT AGENCY: Provide the name of the law enforcement agency which has jurisdiction where you reside:

Name: Belle Glade Police Department	Phone Number: 561-996-7251
Address: Street, City, County, State, Zip Code 40 West Canal Street south, Belle Glade, FL 33430	

CONVICTIONS: Most convictions are not an automatic bar to appointment. The circumstances surrounding the conviction are considered, such as: the nature, number, severity, date of the offense, subsequent history, efforts at rehabilitation, and relation of the offense to the requirements of the position for which you applied.

LIST ALL CONVICTIONS OF CIVIL OR CRIMINAL LAW VIOLATIONS:

Charge:	Date (mo/yr):	City/State:	Charging Agency:
Disposition/Penalty:	Date (mo/yr):	City/State:	Court Agency:
Charge:	Date (mo/yr):	City/State:	Charging Agency:
Disposition/Penalty:	Date (mo/yr):	City/State:	Court Agency:
Charge:	Date (mo/yr):	City/State:	Charging Agency:
Disposition/Penalty:	Date (mo/yr):	City/State:	Court Agency:
Charge:	Date (mo/yr):	City/State:	Charging Agency:
Disposition/Penalty:	Date (mo/yr):	City/State:	Court Agency:
Charge:	Date (mo/yr):	City/State:	Charging Agency:
Disposition/Penalty:	Date (mo/yr):	City/State:	Court Agency:

REQUIRED DOCUMENTATION

Submit all of the following documents that apply to you along with this questionnaire.

Provide:

(1) ORIGINAL documentation

~~(or provide legible notarized copies of documentation with notary certifying that each copy is an exact replica of the original)~~

and

(2) A COPY of each document submitted

At the time that you submit your documents, the Personnel Division will collect the copies of all required original documents and return the original to you. Submit original and a copy of certified official English translation and equivalency for all foreign language documents.

- ✓ - Original Social Security Card
- ✓ - Original or certified copy of birth certificate issued by state, county, or municipal authority bearing an official seal
- Original court documents establishing all name changes
- ✓ - Current Driver's License
- ✓ - Original High School diploma and/or transcripts OR certificate of equivalent education such as possession of a GED or graduation from United States Armed Forces Institute
- All original official college or university transcripts and diplomas
- ✓ - All original official academy, business, trade, and other school transcripts and diplomas
- All original professional licenses and certificates
- ✓ - Original DD214 Military Discharge papers denoting type of separation and character of service
- Final disposition of all convictions of civil or criminal law violations from Clerk of the Court where violations occurred

