

A meeting of the City of Evansville Public Safety will be held on the date and time stated below. Requests for persons with disabilities who need assistance to participate in this meeting should be made by calling City Hall at (608) 882-2266 with as much notice as possible. The meeting will also be held virtually in response to COVID-19. To participate via video, go to this website: <https://meet.google.com/xtf-ayun-xwn>. To participate via phone, call this number: 475-222-5110 and enter PIN: 808 226 480# when prompted. (Your microphone may be muted automatically).

**Copies of the packet and agenda are available at:**  
[www.ci.evansville.wi.gov/city\\_government/public\\_agendas\\_minutes/public\\_safety.php](http://www.ci.evansville.wi.gov/city_government/public_agendas_minutes/public_safety.php)

**Public Safety Committee**  
**Regular Meeting**  
Wednesday, January 5<sup>th</sup>, 2022 6:00 p.m.  
City Hall, 31 S. Madison Street, Evansville, WI

**Agenda**

1. Call to Order.
2. Roll Call.
3. Approval of Agenda.
4. Motion to waive the reading of the minutes of the December 1<sup>st</sup>, 2021 meeting and approve as presented
5. Citizen appearances other than agenda items listed
6. Old Business.
7. New Business.
  - A. Motion to approve the Operator's License application(s) for:  
*(Approved by Chief Reese unless otherwise noted)*
    - (1) Christopher Yates Hurley
    - (2) Clayton James Dershem
    - (3) Mary A Bartlett
    - (4) Kylie Lena Hoops
    - (5) Kathleen Helen Smith
  - B. Temporary Operating Agreement – MD-1 Vehicle, with MercyHealth
8. Evansville Police Department Report.
9. Evansville Emergency Medical Services Report.
10. Meeting Reminder: Next regular meeting scheduled for Wednesday, February 2<sup>nd</sup>, 2022 6:00 p.m.
11. Motion to adjourn.

*Dianne Duggan, Chairperson*

*Please turn off all cell phones while the meeting is in session. Thank you.*



**Public Safety Committee**  
**Regular Meeting**  
Wednesday, December 1<sup>st</sup>, 2021 6:00 p.m.  
City Hall, 31 S. Madison Street, Evansville, WI

**Minutes**

1. **Call to Order:** The meeting was called to order by Public Safety Chair, Dianne Duggan at 6:00 p.m.
2. **Roll Call:**

<b>Members</b>	<b>Present/Absent</b>	<b>Others Present</b>
<u>Aldersperson Dianne Duggan, Chair</u>	<u>P</u>	Patrick Reese, Police Chief
<u>Aldersperson Erika Stuart</u>	<u>P</u>	Darnisha Haley, City Clerk
<u>Aldersperson Gene Lewis</u>	<u>P</u>	Jeremy Welter, License Applicant Member of the general public

3. Approval of Agenda-Duggan made a motion, seconded by Lewis to approve the agenda a presented. Motion passed 3-0.
4. Lewis made a motion, seconded by Stuart to waive the reading of the minutes of the November 3, 2021 meeting and approve as presented. Duggan made a correction to item 7C, “duplex’s” should be spelled “duplexes.” Motion passed 3-0.
5. Citizen appearances other than agenda items listed-None
6. Old Business.
  - A. Stuart made a motion, seconded by Lewis to approve the Operator’s License application for:
    - (1) Jeremy James Welter (*non recommended*) Motion passed 2-0, Lewis abstained from voting.
7. New Business.
  - A. Stuart made a motion, seconded by Duggan to approve the Operator’s License application(s) for: (*Approved by Chief Reese unless otherwise noted*) Motion passed 3-0.
    - (1) Katrina Rogers
    - (2) David Duane Powers
    - (3) Lori Beth Hoke
    - (4) Debra Jeanne Carlson
8. **Evansville Police Department Report.** Chief Reese read the enclosed monthly report covering the training, community outreach, updates in the department, and staffing matters.
9. **Evansville Emergency Medical Services Report.** The committee reviewed the enclosed monthly report provided by Chief Kessenich covering the training, community outreach, updates in the department and staffing matters.
10. **Meeting Reminder:** Next regular meeting scheduled for Wednesday, January 5, 2021 6:00 p.m.
11. **Motion to adjourn.** Duggan made a motion, seconded by Stuart to adjourn at 6:12 p.m. Motion passed 3-0

*Please turn off all cell phones while the meeting is in session. Thank you.*

***Darnisha Haley, City Clerk***

*The minutes are not official until approved by the Public Safety Committee at the next regular meeting.*

*Please turn off all cell phones while the meeting is in session. Thank you.*

# APPLICATION FOR OPERATOR'S LICENSE

7A(1)



CITY OF EVANSVILLE CITY CLERK'S OFFICE  
31 S. Madison St, PO Box 529, Evansville, WI 53536

**New Operator's License: \$35.00**     **Renewal Operator's License: \$35.00**     **Provisional License: \$15.00**

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/casesearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: <u>Christopher</u> <u>Yates</u> <u>Hurley</u> <small>First Middle Last</small>			DATE OF BIRTH: [REDACTED]												
ADDRESS: [REDACTED]			PHONE: [REDACTED]												
CITY: <u>Evansville</u>		STATE: <u>Wis</u>	ZIP: <u>53536</u>		GENDER: <input checked="" type="radio"/> Male <input type="radio"/> Female										
Driver's License No.: [REDACTED]			Issuing State: <u>Wis</u>												
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? <u>2 Years</u>			Former Name(s):												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Prior Street Address if Above Address is Less Than 5 Years</th> <th>State</th> <th>Zip</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>101 W 1st Brooklyn Wis</u></td> <td><u>Wis</u></td> <td><u>Wis</u></td> <td><u>2018</u></td> <td><u>2020</u></td> </tr> </tbody> </table>						Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To	<u>101 W 1st Brooklyn Wis</u>	<u>Wis</u>	<u>Wis</u>	<u>2018</u>	<u>2020</u>
Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To											
<u>101 W 1st Brooklyn Wis</u>	<u>Wis</u>	<u>Wis</u>	<u>2018</u>	<u>2020</u>											

ARREST AND CONVICTION RECORD  
(Anywhere within the United States of America)

2. Have you ever been cited and/or convicted of a felony?	Yes	<input type="radio"/> No
3. Have you ever been cited and/or convicted of a misdemeanor?	Yes	<input type="radio"/> No
4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:		
a) Any underage alcohol violation?	Yes	<input type="radio"/> No
b) Operating a motor vehicle while intoxicated?	Yes	<input type="radio"/> No
c) Selling or furnishing alcoholic beverages to underage person?	Yes	<input type="radio"/> No
d) Permitting underage person on licensed premises?	Yes	<input type="radio"/> No
e) Allowing persons on licensed premises after closing?	Yes	<input type="radio"/> No
f) Any alcohol related violation other than a, b, c, d, and e?	Yes	<input type="radio"/> No
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	Yes	<input type="radio"/> No
h) Fighting, disorderly conduct, assault, or battery?	Yes	<input type="radio"/> No
i) Resisting arrest, interfering with a police officer or obstructing an officer?	Yes	<input type="radio"/> No
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	Yes	<input type="radio"/> No

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following: <input checked="" type="checkbox"/> Successfully completed a Responsible Alcohol Servers Course <input type="checkbox"/> Held an Operator's License issued in Wisconsin	Attach certificate of completion for Responsible Alcohol Servers Course <input type="checkbox"/> An alcohol agent for a retail alcohol license <input type="checkbox"/> The sole proprietor of retail alcohol license
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6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: <u>[Signature]</u>	Email: [REDACTED]
Printed Name: <u>Christopher Hurley</u>	Date: <u>11/30/21</u>

FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments:  Approved: <u>[Signature]</u> Denied: <u>12/13/21</u> Police Chief's Signature Date	Public Safety Committee: Approved: _____ Denied: _____ Date: _____  Clerk's Office Signature _____ Date _____  Receipt # _____
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# APPLICATION FOR OPERATOR'S LICENSE

# 7A(2)

## CITY OF EVANSVILLE CITY CLERK'S OFFICE

### 31 S. Madison St, PO Box 529, Evansville, WI 53536

**New Operator's License: \$35.00**     **Renewal Operator's License: \$35.00**     **Provisional License: \$15.00**

**NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.**

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/casesearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

**1. LEGAL NAME:** Clayton James Derghem  
 First Middle Last  
**DATE OF BIRTH:** [REDACTED]  
**ADDRESS:** [REDACTED] 3  
**PHONE:** [REDACTED]  
**CITY:** Brookfield **STATE:** WI **ZIP:** 53520 **GENDER:**  Male  Female  
**Driver's License No.:** [REDACTED] **Issuing State:** Michigan  
**HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?** 1 month **Former Name(s):**  
**Prior Street Address if Above Address is Less Than 5 Years State Zip From To**  
 10127 Hardwood Tr. Perrinton MI 46871 2016 2021

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America)

**2. Have you ever been cited and/or convicted of a felony?** Yes  No

**3. Have you ever been cited and/or convicted of a misdemeanor?** Yes  No

**4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:**

a) Any underage alcohol violation?	Yes	<input checked="" type="radio"/> No
b) Operating a motor vehicle while intoxicated?	Yes	<input checked="" type="radio"/> No
c) Selling or furnishing alcoholic beverages to underage person?	Yes	<input checked="" type="radio"/> No
d) Permitting underage person on licensed premises?	Yes	<input checked="" type="radio"/> No
e) Allowing persons on licensed premises after closing?	Yes	<input checked="" type="radio"/> No
f) Any alcohol related violation other than a, b, c, d, and e?	Yes	<input checked="" type="radio"/> No
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	Yes	<input checked="" type="radio"/> No
h) Fighting, disorderly conduct, assault, or battery?	Yes	<input checked="" type="radio"/> No
i) Resisting arrest, interfering with a police officer or obstructing an officer?	Yes	<input checked="" type="radio"/> No
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	Yes	<input checked="" type="radio"/> No

**5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.**

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

**Within the last two (2) years, did you have and/or complete one of the following:**

<input checked="" type="checkbox"/> Successfully completed a Responsible Alcohol Servers Course	<input type="checkbox"/> Attach certificate of completion for Responsible Alcohol Servers Course
<input type="checkbox"/> Held an Operator's License issued in Wisconsin	<input type="checkbox"/> An alcohol agent for a retail alcohol license
	<input type="checkbox"/> The sole proprietor of retail alcohol license

**6. CERTIFICATION:** I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

**Signature:** Clayton Derghem **Email:** [REDACTED]  
**Printed Name:** Clayton Derghem **Date:** December 8, 2021

### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

**Police Department Recommendation and Comments:**

**Public Safety Committee:**  
**Approved:** \_\_\_\_\_ **Denied:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Clerk's Office Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Approved:** [Signature] **Denied:** \_\_\_\_\_ **Date:** 12/13/21

**Police Chief's Signature:** [Signature] **Date:** 12/13/21

**Receipt #** 1.146368







# APPLICATION FOR OPERATOR'S LICENSE

# 7A(3)

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New/Renewal Operator's License: \$35.00

Provisional Fee: \$15.00

**NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.**

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/casesearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Mary A Bartlett  
First Middle Last

DATE OF BIRTH: [REDACTED]

ADDRESS: [REDACTED]

PHONE: [REDACTED]

CITY: Evansville

STATE: WI

ZIP: 53536

Gender: Male Female

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 20 years

Former Name(s): Hennin?

Prior Street Address If Above Address is Less Than 5 Years	State	Zip	From	To

Driver's License No.: [REDACTED]

Issuing State: WI

### ARREST AND CONVICTION RECORD

2. Have you ever been convicted of a felony? Yes No

3. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following in the City of Evansville or the State of Wisconsin?

Question	Yes	No
a) Any underage alcohol violation?		<input checked="" type="radio"/>
b) Operating a motor vehicle while intoxicated?	Yes	<input checked="" type="radio"/>
c) Selling or furnishing alcoholic beverages to underage person?	Yes	<input checked="" type="radio"/>
d) Permitting underage person on licensed premises?	Yes	<input checked="" type="radio"/>
e) Allowing persons on licensed premises after closing?	Yes	<input checked="" type="radio"/>
f) Any alcohol related violation other than a, b, c, d, and e?	Yes	<input checked="" type="radio"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	Yes	<input checked="" type="radio"/>
h) Fighting, disorderly conduct, assault, or battery?	Yes	<input checked="" type="radio"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	Yes	<input checked="" type="radio"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	Yes	<input checked="" type="radio"/>

5. For each YES response in #3, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

Successfully completed a Responsible Alcohol Servers Course

Held an Operator's License Issued in Wisconsin

Attach certificate of completion for Responsible Alcohol Servers Course

An alcohol agent for a retail alcohol license

The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Mary Bartlett  
Printed Name: Mary Bartlett

Email: \_\_\_\_\_  
Date: 12-9-2021

FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments:

City Clerk's Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved: [Signature]  
Police Chief's Signature

Denied: \_\_\_\_\_  
Date: 12/20/21

Receipt # \_\_\_\_\_







# APPLICATION FOR OPERATOR'S LICENSE

## 7A(4)

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00     Renewal Operator's License: \$35.00     Provisional License: \$15.00

**NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.**

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial, if you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/casesearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Kylie Lena HOOPS  
First Middle Last

DATE OF BIRTH: [REDACTED]

ADDRESS: [REDACTED] PHONE: [REDACTED]

CITY: Evansville STATE: WI ZIP: 53536 GENDER: Male  female

Driver's License No: [REDACTED] Issuing State: WISCONSIN

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?

Former Name(s):	City	State	Zip	From	To

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America)

2. Have you ever been cited and/or convicted of a felony? Yes  No

3. Have you ever been cited and/or convicted of a misdemeanor? Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

a) Any underage alcohol violation?	Yes <input type="radio"/>	No <input checked="" type="radio"/>
b) Operating a motor vehicle while intoxicated?	Yes <input type="radio"/>	No <input checked="" type="radio"/>
c) Selling or furnishing alcoholic beverages to underage person?	Yes <input type="radio"/>	No <input checked="" type="radio"/>
d) Permitting underage person on licensed premises?	Yes <input type="radio"/>	No <input checked="" type="radio"/>
e) Allowing persons on licensed premises after closing?	Yes <input type="radio"/>	No <input checked="" type="radio"/>
f) Any alcohol related violation other than a, b, c, d, and e?	Yes <input type="radio"/>	No <input checked="" type="radio"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	Yes <input type="radio"/>	No <input checked="" type="radio"/>
h) Fighting, disorderly conduct, assault, or battery?	Yes <input type="radio"/>	No <input checked="" type="radio"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	Yes <input type="radio"/>	No <input checked="" type="radio"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	Yes <input type="radio"/>	No <input checked="" type="radio"/>

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

Successfully completed a Responsible Alcohol Servers Course     Attach certificate of completion for Responsible Alcohol Servers Course

Held an Operator's License Issued in Wisconsin     An alcohol agent for a retail alcohol license

    The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Kylie Hoops    Email: [REDACTED]

Printed Name: KYLIE HOOPS    Date: 12/13/2021

#### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments: \_\_\_\_\_

Public Safety Committee: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ City of Evansville Date: \_\_\_\_\_

Clerk's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: [Signature] Denied: \_\_\_\_\_

Police Chief's Signature: \_\_\_\_\_ Date: 12/20/21

Receipt # \_\_\_\_\_ Receipt #: 1.146434 35.00  
 KYLIE HOOPS  
 Dec 16, 2021 03:36PM







# APPLICATION FOR OPERATOR'S LICENSE

# 7(A)5

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

**New/Renewal Operator's License: \$35.00**

**Provisional Fee: \$15.00**

**NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.**

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/casesearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Kathleen Heleen Smith  
First Middle Last

DATE OF BIRTH: [REDACTED]

ADDRESS: [REDACTED]

PHONE: [REDACTED]

CITY: Evansville STATE: WI ZIP: 53536 GENDER: Male  Female

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 1 yr

Prior Street Address if Above Address is Less Than 5 Years State Zip From To

Prior Street Address	City	State	Zip	From	To
<u>806 S. Spring St</u>	<u>Beverly Dam</u>	<u>WI</u>	<u>53916</u>	<u>02-18</u>	<u>09-20</u>
<u>102 E. 3rd Ave</u>	<u>Bordwood</u>	<u>WI</u>	<u>53520</u>	<u>06-1993</u>	<u>02-18</u>

Former Name(s): Hammon, West, Jaggi

Driver's License No.: [REDACTED] Issuing State: WI

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America).

2. Have you ever been cited and/or convicted of a felony? Yes  No

3. Have you ever been cited and/or convicted of a misdemeanor? Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

Question	Yes	No
<input checked="" type="checkbox"/> Successfully completed a Responsible Alcohol Servers Course	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Held an Operator's License issued in Wisconsin	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Attach certificate of completion for Responsible Alcohol Servers Course

<input type="checkbox"/> An alcohol agent for a retail alcohol license	<input type="checkbox"/>
<input type="checkbox"/> The sole proprietor of retail alcohol license	<input type="checkbox"/>

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: [Handwritten Signature] Email: [REDACTED]

Printed Name: Kathleen Smith Date: 12-22-21

FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments:

City Clerk's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: [Signature] Denied: \_\_\_\_\_

Police Chief's Signature: \_\_\_\_\_ Date: 12/28/21

Receipt # \_\_\_\_\_

Receipts: 1 24402 27.00  
 WITH PAYEE'S  
 Dec 28, 2021 10:07AM

\*Call Kathleen if/once approved.







**Mercyhealth Prehospital and  
Emergency Services Center-Janesville**

580 N. Washington St.  
Janesville, WI 53548

*MercyEMS.org*

Dear Chief,

The MD-1 program is proud to partner with your department. In its continued efforts to ensure the safety of patients, personnel, and equipment, Mercyhealth is clarifying its expectations about operation of the MD-1 vehicle.

In some situations the MD-1 physician must attend to a patient and cannot drive the MD-1 vehicle away from the scene. In these cases, Mercyhealth may request that you assign a member of your agency to bring the MD-1 vehicle to the destination hospital. By assigning one of your members to drive the MD-1 vehicle to the destination hospital, it allows both MD-1 and the transporting ambulance to return to service as soon as practical.

Attached is a Memorandum of Understanding outlining the requirements and expectations when a member of your agency operates the Mercyhealth MD-1 vehicle. Please take some time to review the attached MOU and contact Scott Meyers at 608-314-2541 for any questions or concerns.

Dr. James MacNeal

## **Temporary Operating Agreement – MD-1 Vehicle**

Mercyhealth MD-1 is a Non-Transport ALS Unit, staffed with a physician (“MD-1 Physician”) to provide a prehospital physician response. Any public safety agency may call for MD-1 response in order to supplement their first responders on scene with a physician level of care.

From time to time it may be necessary for the MD-1 Physician to accompany the patient in the ambulance during transport. In such cases, the MD-1 Physician may ask the on-scene commander, or his/her designee, to assign a member of their agency to operate the MD-1 Non-Transport ALS unit and follow the ambulance to the destination hospital.

If the on-scene commander, or his/her designee assigns a member of their agency to operate the MD-1 Non-Transport ALS unit (i.e., be the “MD-1 Operator”), the agency assumes liability for any and all damages that might occur related to MD-1 Operator’s operation of the MD-1 Non-Transport ALS unit.

The MD-1 Operator must meet the following requirements:

- Hold a valid, current driver’s license.
- Be capable of operating a sport utility vehicle.
- Be acting in their official capacity as a member of a fire department, police department, sheriff’s office, or EMS agency (“Agency”).
- Wear a seat belt, even if air bags are available.
- Shut off the engine, remove ignition keys, and lock vehicle doors whenever the vehicle is left unattended.
- Promptly return the ignition keys to the MD-1 Physician upon arrival at the destination hospital.
- Be insured by their Agency for any and all damages that might occur related to their operation of the MD-1 Non-Transport ALS Unit.

MD-1 Operators shall at all times operate the MD-1 Non-Transport ALS Unit with due care and consistent with all applicable traffic control devices and signals, posted speed limits, and all applicable laws.

In addition, the MD-1 Operator must not:

- Allow others to ride in MD-1 Non-Transport ALS Unit.
- Use MD-1’s emergency lights and sirens.
- Use cell phones or portable/emergency radios unless absolutely necessary. While driving, attention to the road and safety should always take precedence.

All accidents in the MD-1 Non-Transport ALS Unit, regardless of severity, must be reported to the police and to \_\_\_\_\_.

In addition, accidents are to be reported immediately (from the scene, during the same day, or as soon as practicable if immediate or same day reporting is not possible) to \_\_\_\_\_.

MD-1 Operators must report all ticket violations received during the operation of the MD-1 Non-Transport ALS Unit, within 72 hours to \_\_\_\_\_.

Please sign below indicating your understanding of and agreement to the terms described herein, in consideration of your use of the MD-1 Service.

**Agency**

Agency Name

\_\_\_\_\_

Authorized Representative Signature

\_\_\_\_\_

Authorized Representative Name/Title

\_\_\_\_\_

Date

\_\_\_\_\_

**Mercyhealth**

Authorized Representative Signature

\_\_\_\_\_

Authorized Representative Name/Title

\_\_\_\_\_

Date

\_\_\_\_\_







# Evansville Public Safety Police Report

January 5th 2022

## Committee Members:

Chair Dianne Duggan  
Aldersperson Erika Stuart  
Aldersperson Gene Lewis

## City Representatives:

Mayor: William Hurtley  
City Administrator: Jason Sergeant  
Prepared by: Chief Patrick Reese

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## Officer Training:

- Chief Reese, Lt. Jones and some members of the Evansville Fire District attended some suicide prevention training w/ the Rock County Sheriff's Office. In 2022 we will be bringing this training to our entire staff
- All Officers have or will be finishing training on MDC updates. This is required every 2 years
- Officer Nankee attended his first week of Defense and Arrest Tactics training, he goes back on January 10<sup>th</sup> to finish his second week
- Officer Ziolkowski is doing well in field training and we believe he will likely finish field training early do to his past experience
- Sgt. Reilly has been working on the yearly training calendar
- January training topic will be Handle w/ Care
- Sgt. Rittenhouse completed REID interview and interrogation

## Community Relations:

- Jill will be meeting with Joan Kamholtz to discuss our community meal and silent auction coming up at the end of January

## Monthly Update:

### Technology/Equipment/Building Update:

- The new server was ordered. Lt. Jones has been working with Computer Know How on an install timeline
- We ordered two new handheld radar units. One that is approximately 20 years old broke and can no longer be repaired. We never added one when we added a squad car last year so now all patrol cars will have a handheld radar unit
- The new squad that was budgeted for has been ordered
- Chief Reese talked with Dale Roberts about DPW painting the exterior of our Building. Dale feels this is beyond their scope and recommended we hire a professional company. We budgeted for the building to be painted in 2022

- The battery backup for the phones went out. We purchased a new battery backup as recommended by the phone repair person

Police Commission/staffing:

- Ofc. Blom completed his field training and is currently assigned to third shift patrol

Calls for Service:            December 2021: 984            December 2020: 968

Accreditation:

- Chief Reese will continue to make changes to policy per our policy advisor's recommendations
- Chief Reese was assigned St. Francis PD's assessment and started working on those files in December and will continue to throughout January
- Detective Sergeant Rittenhouse has been working with the rest of the staff on obtaining proofs to finish up 2021 and start on 2022 accreditation

Notable calls/incidents by Sgt. Reilly:

- Officer Johnson arrested a subject for possession of 85g of THC and possession of drug paraphernalia after he conducted a traffic stop
- Sgt Reilly arrested a subject for possession of methamphetamine, possession of drug paraphernalia, felony Bail Jumping, and carrying a concealed weapon after he conducted a traffic stop of a subject who had a warrant out of Dane County
- Officer Blom cited a subject for possession of drug paraphernalia after he was found with a meth pipe
- Officer Nankee arrested a drug impaired subject for 5th offense OWI. The operator of the vehicle was called in as a traffic complaint north of the city. Officer Nankee located the vehicle traveling at a high rate of speed on S Madison St and conducted a traffic stop. Officer Nankee conducted a DRE evaluation and opined the subject was under the influence of a stimulant

- Sgt Rittenhouse, Officer Nankee, and Officer Schmidt were dispatched to a welfare check in which a subject was hallucinating. The subject was later found to be armed with several knives after they were fearful someone was going to break into their house. Officers on scene determined the subject was a danger to themselves and they were taken into custody for medical evaluation. While taking the subject into custody the subject became resistive and more knives were found on them. Officers were able to take the subject into custody without using force
- Sgt Rittenhouse continues her investigations into a couple fraud complaints. One victim had a monetary loss of over \$37,000. Sgt Rittenhouse has been obtaining warrants and working with outside law enforcement agencies in an attempt to solve the cases.

Other Concerns/Comments:



# City of Evansville EMS

11 W. Church St.  
Evansville, WI 53536  
(608)882-2269  
Chief Jamie Kessenich



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## Public Safety Meeting January 5, 2022

1. Calls for Service:
  - a. 58 Calls during the month of December 2021. (641-58 /642-0)
  - b. 48 Calls during the month of December 2020. (641-45/642-3)
  - c. To date call volume           2021-612           2020-547
  - d. That is an increase of 10.6% from the previous year.
2. Continue to wear PPE on all calls.
  - a. N95 Mask during patient care or contact/Surgical Masks while in the vehicles and building.
  - b. Safety Glasses/Goggles
  - c. Face shield
3. Training:
  - a. December training was online only.
4. Maintenance:
  - a. None to report
  - b. Footville is currently borrowing our reserve ambulance as they are having some repairs completed to theirs. Should return by the end of the week.
5. Building Needs:
  - a. Different counter space for report writing.
  - b. Sleeping quarters, need to be up to code.
  - c. Kitchen does not meet code.
  - d. Continuing to work with Findorff on a bid for the cost of making Bay #1 larger for the ambulance.
6. Please continue to call or email if you have any COVID-19 related questions. Rock County has seen a significant rise in COVID-19 cases in both Vaccinated and Unvaccinated people. I would encourage everyone to get vaccinated.
  - a. Those that qualify for a booster are encouraged to get it. The Rock County Health Department is now offering Vaccines and Boosters at their Hwy. 51 location in Janesville. Along with your PCP, Walgreens or CVS locations locally.



- b. Masks must continue to be worn while inside the buildings and vehicles at all times.
- c. We have had a handful of city employees and/or family test positive for COVID. Please ensure that you are taking the necessary precautions to prevent this and any further exposure to family or co-workers.