

Employment Record

Name _____ **Empl.** 20871 **Computer #** D026 **Date of Hire** 01/22/22 **Transferred/Rehired** _____
Maith, Brenda M.

Date	Position	PCN	Department	Rate of Pay	Grade	Reason for Change
01/22/2022	Records Clerk	SRI82NN005	5012	\$34,965.84	9	Hire date
08/20/2022	RECORD CLERK	SDA82NN001	5011	\$33,768.00	9	TRANSFER

Employment Record

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Maith, Brenda M.	20871	D026	01/22/22	
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01/22/2022	Records Clerk	SRI82NN005	\$34,965.84	
		5012	9	Hire date

Augusta, Georgia

Job Description

Approved Title: Records Bureau Clerk

Job Code: 82NN

FLSA Classification: Non-exempt

Working Job Title: Records Clerk

Pay Grade: 09

Date Revised: June 12, 2018

Department: Sheriff (5012)

Original Date Prepared: August 25, 1997

Reports To: Records Bureau Sergeant

Does the Position Have Direct Reports? Yes No

If Yes, What is the Title of the Position that Reports to this Position:

Is the Position Safety Sensitive? Yes No

GENERAL SUMMARY: Provides clerical support, maintains records, and disseminates information within the guidelines of state and federal laws, departmental rules and regulations, County ordinances, Public Information and Privacy Acts, and GCIC/NCIC. Reports to the Sergeant or other designated person and works with co-workers, the public, law enforcement agencies, attorneys, and court personnel to provide administrative support.

KEY RESPONSIBILITIES AND PERFORMANCE STANDARDS

Percentages	TYPICAL CLASS ESSENTIAL DUTIES:
40 %	Merge field reports into local computer, checking for accuracy and adding additional fields to the computer system, as well as indexing accident report information.
40 %	Enters, cancels, clears, modifies, files into state/federal computer, as well as operating two-way radio.
5 %	Take in copy monies, and writes cash bond receipts for citations.
5 %	Assists in checking in and separating incoming paperwork, as well as checking in property for safe-keeping.
5 %	Enters and updates house watch requests and daily bulletin on the County's Intranet computer system.
5 %	Assists general public or other law enforcement agencies by phone or in person, and serves as resource to department personnel, and processes incoming daily mail.
As Required	Performs other duties of a similar nature or level.

100% Total: 100

(This section's percentage must total 100%).

POSITION SPECIFIC RESPONSIBILITIES MIGHT INCLUDE:

- Enters reports into the state/federal computer system.

REQUIRED MINIMUM QUALIFICATIONS:

Education: High School diploma, trade school, or G.E.D.

Experience: 2 - 3 years of experience in a similar position, or sufficient experience to perform the principal duties and responsibilities.

Knowledge/Skills/Abilities:

- Considerable knowledge of modern office practices and procedures, filing and record systems, and NCIC/GCIC computer system.
- Familiarity with departmental rules and regulations, state and federal laws, Public Information and Privacy Acts, GCIC guidelines, and County ordinances.
- Proficiency in interpersonal relations and basic mathematical calculations.
- Mastery of operating a computer, copier, cash register, police radio, and standard office equipment.
- Good communication skills, both oral and written.
- Demonstrated ability to work independently.

Skills:

- Typing/Keyboarding (35 words per minute - minimum)

Certification: GCIC Certification

OTHER:

Does this position require staff call up in an emergency situation? Yes No
Is travel from office to other locations required of this position? Yes No
If yes, what is the percentage of travel involved? Less than 50%? Yes No More than 50%? Yes No

PHYSICAL REQUIREMENTS:

Depending upon area of assignment:
Positions in this class typically require: walking, pushing, pulling, lifting, fingering, grasping, feeling, talking, hearing, seeing and repetitive motions. Work is performed in an office setting.

Light Work: Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or negligible amount of force constantly to move objects. If the use of arm and/or leg controls requires exertion of forces greater than that for Sedentary Work and the worker sits most of the time, the job is rated for Light Work.

FINANCIAL RESPONSIBILITY:

Is this position involved in a budgetary or financial approval responsibility? Yes No
If yes, please indicate size of budget or financial approval responsibility in annual dollar amount: \$ 0

TRAINING & SUPERVISORY RESPONSIBILITY:

How many people are being supervised or trained? None
One staff Yes No Two to five staff Yes No Six to ten staff Yes No More than ten staff Yes No

The preceding job description has been designed to indicate the general nature and level of work performed by employees within this classification. It is not designed to contain or be interpreted as a comprehensive inventory of all duties, responsibilities, and qualifications required of employees to this job.

REVIEW/APPROVALS

<u>Brenda M. Maith</u>	<u>8/8/22</u>
Employee (Print Name)	Date
<u>[Signature]</u>	
Line or Staff Management	<u>8/8/22</u>
	Date
<u>[Signature]</u>	
Department Director	<u>8/8/22</u>
	Date
Compensation Administration Staff	
	Date
HR Director	
	Date

- Proficiency in interpersonal relations and basic mathematical calculations.
- Mastery of operating a computer, copier, scanner and standard office equipment.
- Good communication skills, both oral and written.
- Demonstrated ability to work independently.

Skills:

- Typing/Keyboarding (35 words per minute - minimum)

Certification:

OTHER:

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REVIEW/APPROVALS

<u>Brenda M. Martin</u>	<u>8/8/22</u>
Employee (Print Name)	Date
<u>[Signature]</u>	<u>8/8/22</u>
Line or Staff Management	Date
<u>[Signature]</u>	_____
Department Director	Date
_____	_____
Compensation Administration Staff	Date
_____	_____
HR Director	Date

Bonnie Hayes

IA

From: Brenda [REDACTED]
Sent: Friday, July 8, 2022 10:42 PM
To: Bonnie Hayes; Brenda Maith
Subject: [EXTERNAL] Letter of Interest for Open Records Clerk - Internal Affairs

Good afternoon,

I'm very much interested in the Open Records Clerk-Internal Affairs position. The responsibilities and desired qualifications listed in the job description align with my past experience as well as my current position in the Records Department.

I'm very aware of confidentiality due to my previous work in Legal Services, Human Resources, Information Technology. During my time in Legal Services, I worked closely with the attorney completing several tasks such as the schedule, calendar, appointments with the GBI, open record, etc. My time in Human Resources, I worked as the admin assistant to the director. I also supervised six clerical staff, maintained the lease agreements on the copiers and fax machine. I kept an open communication within the department of need to know information. I was also responsible for keeping up with staff time, personnel records, etc. My time in Information Technology was served as a Computer Analyst. In this position work responsibilities varied from day to day, just to mention a few Served as the liaison between the campuses; setting up computers, monitors, smartboards, trouble shooting issues as they would arise from staff. Would also evaluate areas/building to determine the need for computers/laptops as well as wi-fi. Responsibility also included keeping track and inventory of equipment; on site as well as the equipment staff had that worked from home.

Throughout my career, I have gained substantial experience and valued never to leave a customer nervous of asking a question.

I have a very calming personality and work well with others and independently; I would be a great fit for your area.

Thank you for your consideration,

Warm Regards,

Brenda M. Maith

[**NOTICE:** This message originated outside of the City of Augusta's mail system -- **DO NOT CLICK** on links, open **attachments** or respond to **requests for information** unless you are sure the content is safe.]

BRENDA M. MAITH

Augusta, Georgia 30906

PROFESSIONAL EXPERIENCE

East Central Regional Hospital (Computer System Analyst)

3/2012 – Present

Requisition equipment through a web based system titled "Order Now". Grant employees computer access and/or additional access. Grant and/or deny request for new technology. Make visits to various areas on campus to fulfill requests for new equipment (workstations/printers) as approved. Maintain record of missing/stolen equipment - ensure Hospital Security is notified and a report is taken from the end user. Install computers, network printers, video conference equipment, and various types of software. Ensures equipment operable and staff is properly trained. Assist with testing of various projects prior to being pushed out to staff (ex. EMR, KRONOS, Avatar, Windows 11, 10, 7, Anti-Virus Software, GroupWise to Outlook, Internet Explorer 11, Disabling Jump Drives and Auto-run features, LAN /WAN Transformation). Review/evaluate detailed monthly billing of equipment, data charges and disputes as necessary. Interact with the helpdesk to resolve outstanding tickets. Interface with staff to resolve computer issues via telephone or by office visit. Escort Dell Technician/Vendors on campus and serve as liaison for the hospital as needed for various projects. Decommission equipment as it (computers, laptops and printers) becomes outdated or destroyed. Update records in Maximo and other data bases to maintain inventory accuracy. Interface with staff to assist in determining equipment needs. Deactivate and remove computer access of employees that are no longer employed with the state. Communicate with hospital staff regarding Outages/Downtime (being on call-available). Equipment Movement and Storage – maintain appropriate level of equipment across campus. Computer Lab Maintenance – Ensure the computers in both labs (August and Gracewood campus) are operable. Ensures equipment is removed and data jacks deactivated in a timely manner when building are no longer used. Responsible for securing and maintaining equipment. Participate in weekly, bi-weekly, monthly conference calls and quarterly visits with sister hospitals. Also provides customer service to the employees of the State of Georgia.

East Central Regional Hospital (Operations Analyst-EL)

1/2008 – 2/2012

Data Management Department – Managed various departmental databases and filing of supporting critical forms. Tested new data collection instruments for accuracy. Assisted with maintenance of the facility website, analyzed data submitted and developed unique department web pages suggesting improvement alternatives for programs. Completed weekly and monthly crystal and excel reports. Interface with staff to resolve computer issues via telephone or by office visit. Assisted with teaching computer classes and installation of software. Requisitioned equipment, granted new employees computer access and also granted additional access to other employees as needed. Deactivate and remove computer access of employees that are no longer employed with the state. Computer Lab Maintenance – Ensure the computers in both labs (August and Gracewood campus) are operable. Assisted in the development of procedures for incorporating new system databases while ensuring the security of databases was maintained. Ensured the secure storage of surplus equipment while maintaining the accuracy of the equipment database.

**East Central Regional Hospital
Program Associate**

2/1/07 – 1/2008

Data Management Department – Maintained database for over 500 consumers on a daily basis. Completed weekly and monthly crystal and excel reports. Interface with staff to resolve computer issues via telephone or by office visit. Assisted with teaching computer classes and installation of software. Ensured the secure storage of surplus equipment while maintaining the accuracy of the equipment database. Worked with the development of the equipment database.

**East Central Regional Hospital
Program Associate**

6/2006 – 1/2007

Served as personal secretary to the Director of Human Resources (*Human Resource Management & Human Resource Development was consolidated, Director appointed*). Maintained calendar, scheduled appointments, arranged meetings and prepared agendas as well as copies for meeting. Attended and took minutes at meetings. Arranged travel arrangements. Independently solved problems based on knowledge of the department and the facility. Accurately maintained time records of twenty-one employees in the department. Requisitioned office supplies and equipment. Responded to incoming mail, phone calls and electronic requests; initiated and prepared documents. Taught computer software and basic typing classes. Independently prepared documents, personnel actions, statistical reports, graphs, policies, etc. Supervised four clerical workers.

**East Central Regional Hospital
Program Associate**

5/2004 – 6/2006

Manager of Human Resource Development - personal secretary/assistant. Served as liaison between the department and other campus offices (Human Resources Management, CEO's office, Business Office). Solved problems independently based on knowledge of the department and the hospital. Disbursed information/benefits and/or completed transactions according to department procedures. Responded to incoming mail, phone calls and electronic requests; initiated and prepared documents in support of the department. Researched and analyzed data; generated regular and ad hoc statistical and informational reports as requested. Maintaining all financial, personnel, and related records of the department. Served on various committees and task forces as required.

**Gracewood State School and Hospital
Program Assistant**

5/2003 – 5/2004

The Hospital name changed to East Central Regional Hospital (ECRH) Served as personal secretary to the Legal Services Officer. Maintained the schedule/calendar of the attorney, scheduled appointments with other attorneys and or legal firms, assisted with legal documents, handled of confidential documents, took dictation, maintained personnel records and the department budget. Ordered supplies, answered the telephone, prepared expense reports for reimbursement and maintained files. Served as liaison between the Legal Department and other campus offices (Human Resources Management, CEO's office, Business Office). Secured and distributed paychecks to department employees. Took minutes at various meetings. Prepared monthly/quarterly HIPAA and Grievance reports for the Region Office. Prepared other reports on an as needed basis. Assisted in CEO office as needed.

**Gracewood State School and Hospital
Program Assistant**

12/2001 – 05/2003

Served as secretary/assistant to the Director of Consumer Resources Unit (CRU). Maintained/prepared documents for the Director's signature, scheduled appointments, meetings; handled confidential materials. Attended and took minutes at the following monthly/bimonthly meetings: Human Rights Committee, Human Rights Sub-Committee, Comprehensive Behavior Plan and Continued Habilitation Committees. Prepared a monthly and quarterly report on the Comprehensive Behavior Committee and submitted to the Chief Executive Officer (CEO). Assisted the Director with two Gracewood Group Homes; attended weekly meetings on the recommended selection of clients for the homes. Notified parents, guardians and regional boards regarding dismissal of a client from Gracewood.

**Gracewood State School and Hospital
Secretary Principal**

03/93 – 12/2001

Department was dissolved 12/01 by the Chief Executive Officer (CEO) – staff was reassigned to various departments on campus. Served as personal secretary/assistant to the Director of Program Resource and Evaluation Supports (PRES). Supervised 5 Clerical Workers: maintained Director's schedule, prepared documentations for Director's signature, scheduled appointments for/with the Director, handled confidential material. Maintained personnel and budget records for the division (15); served as liaison between PRES and other campus offices such as Human Resources, CEO's office, Business Office, etc. Also worked closely with the Director of Activity Therapy in ordering all recreation supplies for the campus (approximately 700 clients); completed monthly and yearly reports for the recreation department and attended monthly recreation meetings. Performed various Human Resource functions (scheduled, interviewed applicants, performance appraisals, personnel actions). Distributed and secured paychecks.

Volunteer

2001 – 2012

Taught children and adults basis computer skills, identification of the different parts of the computer and also basic troubleshooting techniques.

Technical Skills: Microsoft Office Suite (0365, Word, Excel, Access, PowerPoint), Windows XP, Crystal Reports, SQL, Oracle, GroupWise, Working with various databases, (Continuous Computer Training – several computer books)

Education

Computer classes at Augusta Technical School	1996-1997
Computer classes taught at Gracewood via Staff Development (Atlanta)	2004 – 2007
Security Training/Computer Training – ECRH	2008-present

**RICHMOND COUNTY SHERIFF'S OFFICE
CIVILIAN PERSONNEL
CODE OF ETHICS**

I am dedicated to serving the public. I will exhibit honesty and integrity through ethical behavior. I will assure that all rules and regulations which govern my position are not violated in any manner. I will keep my private and social life free from criticism. I will obey the laws of the land. I will obey and enforce the rules and regulations of the RCSO without fear, favor or ill will.

I will not divulge confidential information I receive during the performance of my duties. I will never act in a selfish manner or let my personal feelings, friendships, prejudices or animosities influence my decisions. I will recognize the high responsibility of my position as a symbol of public faith and will be faithful to the ethics of public safety service. I will constantly strive to achieve those objectives and ideals of my profession.

MARTIN, BRENDA M.

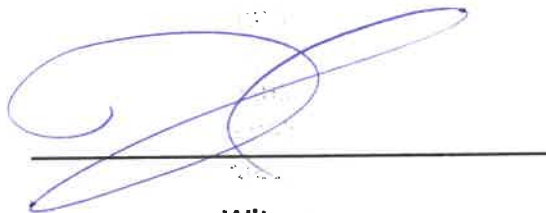
Printed Name



Signature

1-14-22

Date



Witness

Policy and Procedure

3.7 Disciplinary Procedures

3.7-1 Code of Conduct and Appearance (GACP 1.4) (CALEA 26.1-1)

General Rules & Regulations

The Sheriff's Office Code of Ethics is a general standard of conduct for all employees. Employees will be held accountable for their actions, conduct and speech when these behaviors conflict with our core values, mission or creed. Personnel who cause undue embarrassment or damage the reputation of and/or erode the public's confidence in the RCSO will be deemed to have violated this policy.

Conformance to Laws - Employees will obey all laws of the United States and of any state and/or local jurisdiction in which the employee is present. A conviction for the violation of any law will be prima fascia evidence of a violation of this section. Findings and disciplinary action by the RCSO, under charges for a violation of this section, will be independent of any criminal proceedings. Any employee arrested or charged with a criminal violation will notify the immediate supervisor as soon as possible prior to reporting for duty.

Violation of Rules - Personnel will not commit any acts or omission to act which constitute a violation of RCSO rules, regulations, directives, policies, procedures or orders.

**RICHMOND COUNTY SHERIFF'S OFFICE UNIFORMED SERVICES
EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT (USERRA) POLICY**

The Richmond County Sheriff's Office offers employment equally to all qualified individuals and does not discriminate against any person based upon prior, current, or future military obligations with any branch of the United States Armed Services. Federal Law prohibits any such discrimination. The Uniformed Services Employment and Reemployment Rights Act (USERRA) provides protection to the uniformed services which are the Army, Marine Corps, Air Force, Coast Guard, and the commissioned corps of the Public Health Service. This includes the Reserve components of these services and the Army National Guard and Air National Guard, as well as any other category of persons designated by the President in time of war or emergency.

The purpose of the Uniformed Services Employment and Reemployment Rights Act (USERRA) is: to encourage non-career service in the uniformed services by eliminating or minimizing the disadvantages to civilian careers and employment which can result from such service; to minimize the disruption to the lives of persons performing service in the uniformed services as well as to their employers, their fellow employees, and their communities, by providing for the prompt reemployment of such persons upon their completion of such service; and to prohibit discrimination against persons because of their service in the uniformed services.

It is the Policy of the Richmond County Sheriff's Office to fulfill its obligations pursuant to the mandates of USERRA. The Richmond County Sheriff's Office actively encourages its employees to communicate to Command Staff regarding any issues related to their employment and military commitment. USERRA generally requires U.S. employers regardless of size or location of operation, which would include the Richmond County Sheriff's Office, as well as foreign employers operating in the United States or its territories, to reemploy eligible veterans returning to their civilian employment after a period of service in the uniformed services. It requires employers, such as the Richmond County Sheriff's Office, with certain exceptions, to provide training to restore seniority, status, pay, pensions, and other benefits that would have accrued but for the employee's absence due to military service.

The Policy outlined in this document are in addition to and complementary with the policies outlined in the City of Augusta, Georgia's Policy and Procedure Manual pages 23-26 as well as those outlined in the Richmond County Sheriff's Office Policy and Procedure Manual 3.4-1 Leave Program and is appended thereto. Both the City of Augusta, Georgia's Policy and Procedure Manual pages 23-26 and the Richmond County Sheriff's Office Policy and Procedure Manual' information relating to USERRA are incorporated herein by reference.

All employees of the Richmond County Sheriff's Office who are absent from their employment with the Richmond County Sheriff's Office because of military service shall be deemed to be on furlough or leave of absence while performing military service. The RCSO may request your provide military leave orders for any military leave that exceeds 30 day. Some of our employees will perform inactive duty training in the National Guard or Reserve. Such inactive duty training is normally but not always performed on weekends. Those National Guard

and Reserve members will also perform annual training and/or specialized training in their Reserve components. National Guard and Reserve service is no longer limited to "one weekend per month and two weeks per year." Many National Guard and Reserve members now perform training that is much more frequent, and lengthy.

USERRA is not limited to the National Guard and Reserve. An employee who leaves employment with the Richmond County Sheriff's Office for service in the regular military also can have rights under USERRA. The law also protects an employee who takes a day or two off from work for the purpose of an examination to determine fitness to join any branch of the service. After completion of such an examination, regardless of the outcome, the employee is entitled to reemployment under USERRA.

Section 4311(a) of USERRA provides as follows:

A person who is a member of, applies to be a member of, performs, has performed, applies to perform, or has an obligation to perform service in a uniformed service shall not be denied initial employment, reemployment, retention in employment, promotion, or any benefit of employment by an employer on the basis of that membership, application for membership, performance of service, application for service, or obligation.

The Richmond County Sheriff's Office will not adversely consider military status or service (including but not limited to an application or obligation to perform military service) when making hiring, promotion, or firing decisions, or in determining eligibility to any benefit of employment.

Pursuant to the Richmond County Sheriff's Office Military Leave Policy, the employees' Division Commander shall be the agency point of contact with the employee. If a Division Commander is the deployed employee, then the Chief Deputy shall serve as the agency point of contact. The Human Resources Director for the City of Augusta shall serve as the Human Resources point of contact for all deployed employees, regardless of rank or assignment and issues concerning USERRA.

The specific wording of the employee's notice of military service or obligations is not important, so long as the employee conveys the information that he or she is leaving the employment at the Richmond County Sheriff's Office for the purpose of service. The use of a word like "resign" does not defeat the employee's right to reemployment, so long as the employee has informed the Richmond County Sheriff's Office that military service is the reason for the resignation.

The Richmond County Sheriff's Office strives to encourage and support our men and women who serve in the Armed Forces. Should you have any questions regarding USERRA, please do not hesitate to contact the Augusta, Georgia Human Resources Department or the Staff Command of the Richmond County Sheriff's Office.

Policy Title:	3.4 Benefits		
Policy Number:	3.4-1	Effective Date:	March 10, 2014
Sub Title:	Leave Program	Revised Date:	August 12, 2016
GPAC:		CALEA:	22.2.1

3.4-1 Leave Program

Administrative Leave - Leave with pay due to an extended absence, pending the outcome of an administrative review or other investigation, or at the discretion of the Sheriff.

Leave Without Pay (L.W.O.P.) - A division commander may grant one work day of leave without pay. Requests for leave without pay that exceed one work day must be submitted through the chain of command to the Sheriff, for approval. All leaves of absence are required to adhere to the following practices:

1. Leave without pay will be granted only when it will not adversely affect the interest and effective operations of the RCSO.
2. Failure of an employee to return to work at the expiration of the approved leave will be considered as absence without leave and may be grounds for termination.
3. No Vacation Leave will be earned by an employee for the time that the employee is on leave without pay.

Military Leave/Deployment - Pursuant to all applicable federal and state laws, employees who have required military training obligations will be allowed up to 18 days (generally 8 hour days) of military leave with pay. Employees that have required military training obligations that exceed the allotted may use vacation leave or adjust their schedule so that their position is filled during their absence. If an employee is deployed for an extended period of time, he/she may opt to cancel their medical coverage with the county until their return to duty. Within 30 days of returning to duty, the employee must schedule a meeting with the county human resources division to reinstate medical coverage. Employees on military leave and deployment are considered to be on a leave of absence, during which time they are not subject to recall or eligible for secondary employment.

Procedures –

1. Employees on military leave for **thirty (30) calendar days or less** are allowed to maintain department issued equipment at their place of residence, with exception to department owned vehicles which will be parked at the Richmond County Sheriff's Office Sub-station. The employee shall follow departmental policy regarding the securement of department issued equipment.
2. Employees on military leave for **thirty-one (31) calendar days or more** shall surrender their Richmond County Sheriff's Office Identification Card, Badge(s), clothing (e.g., hat, coat, shirt, body armor, rain jacket, traffic vest, etc.), Departmental Weapon(s) (e.g., rifle(s), shotgun(s), handgun(s), other firearms, chemical spray, impact weapon, etc.), Departmental Vehicle and key(s) to the person(s) tasked with receiving said equipment at the direction of the employees Division Commander.
3. Supervisors of employees departing on military leave for **thirty-one (31) calendar days or more** shall ensure this policy is followed and have the item(s) return to take place on the last working day the employee has prior to leaving on military leave.
4. The employees' Division Commander shall be the agency point of contact with the employee. If a Division Commander is the deployed employee, then the Chief shall serve as the agency point of contact.
5. The Human Resources Director for the City of Augusta shall serve as the Human Resources point of contact for all deployed employees, regardless of rank or assignment.
6. All deployed employees shall complete an exit interview with the Chief, or their designee, prior to deployment.
7. All agency owned equipment that is returned by employees who are deployed for periods of 31 calendar days or more shall be stored in the Department Armory (weapons) and the Department Quartermaster Supply Room (Taser, Impact Weapons, Chemical Agents, Duty Gear, Uniforms and accessories, badges handcuffs, hats radio etc.)
8. When returning to duty after a deployment consisting of 31 calendar days or more, the employee shall complete an interview with the Chief, or their designee, prior to returning to duty.

9. Initial and/or refresher training shall be provided to all employees who have returned from a deployment consisting of **91 calendar days or more**.

10. With the technology now available, communications with all points of contact and the deployed employee shall be maintained routinely throughout their deployment via email, voice mail, phone, text, etc. This will facilitate the ease of transition and reintegration of the employee back to their official capacity with Richmond County Sheriff's Office.

Reintegration of Department Personnel

1. 30 Calendar Days or Less – Employees shall advise their supervisor as soon as possible of their date of return. Supervisor's should schedule the employee to report to work no later than the first workday on their next regularly scheduled shift, after termination of his/her service as indicated on the Military Orders and after allowance for safe travel home from the military duty location and an eight (8) hour rest period per USERRA 38 U.S.C. 4312 (e); unless on other approved leave.

2. 31 Calendar Days or More – Employees shall advise their supervisor as soon as possible of their date of return. Supervisor's should schedule the employee to report to work no later than the first workday on their next regularly scheduled shift, after termination of his/her service as indicated on the Military Orders and after allowance for safe travel home from the military duty location and an eight (8) hour rest period per USERRA 38 U.S.C. 4312 (e); unless on other approved leave.

The employee shall complete an interview with the Chief, or their designee, prior to returning to duty. At this time arrangements will be made for the equipment/items to be reissued to the employee via the employee's Division Commander or their designee.

3. 91 Calendar Days or More - Employees returning from ninety-one (91) days or more military leave will be reemployed in accordance with USERRA 38 U.S.C 4312. Employees shall advise their supervisor as soon as possible of their date of return.

a. Employees shall, at a minimum, receive the following training prior to returning to duty:

- i. Use of Force to include Use of Deadly Force;
- ii. Defensive Tactics/Recertification on all issued weapons (Taser, Chemical Agents, impact Weapons, etc.)

- iii. Legal Update;
- iv. Policy Changes/Updates
- v. Firearms Qualification

vi. Any additional training as determined by the Chief, The Department Training Coordinator, and meet the 20 hour In Service P.O.S.T. requirements

b. If any certifications have expired during the employees' deployment then the employee shall attend a basic certification course prior to return to full duty.

4. Allotted Hours – each employee of Richmond County to include Sheriff's Office employees, are allotted 144 hrs. a year paid Military Leave.

The 144 hrs. a year will be computed using the federal fiscal year, October 1st thru September 31st.

An employee, once he/she has used up their 144 hrs. may at their discretion use vacation or sick time. A letter from the employee stating either vacation and/or sick is to be used must be forwarded to the employee's supervisor and to the Personnel Office. If the employee elects to use this time the supervisor will send the Personnel Office the day or days the employee is using. The Personnel Office will enter time in the ADP system on scheduled work days after the employee has exhausted 144 hrs. and the employee is still out due to military service.

Each employee is responsible for keeping up with paid hours used on Military Leave. When 144 hrs. of Military Leave is exhausted and the Personnel Office has no notification from the employee that he/she wishes to use vacation/sick time, no entry will be made.

**ACKNOWLEDGEMENT OF RECEIPT OF THE RICHMOND COUNTY SHERIFF'S
OFFICE UNIFORMED SERVICES AND REEMPLOYMENT RIGHTS ACT OF 1994
("USERRA") POLICY**

1. The Undersigned Acknowledges that she/he is an Employee of the Richmond County Sheriff's Office
2. The Undersigned Employee Acknowledges that she/he has received a copy of the Richmond County Sheriff's Office Uniformed Services and Reemployment Rights Act of 1994 ("USERRA") Policy.
3. The Undersigned Employee Acknowledges that she/he has read the Richmond County Sheriff's Office USERRA Policy.
4. The Undersigned Employee Acknowledges that she/he has read the Richmond County Sheriff's Office USERRA Policy and understands the information in the Policy or that they have the right to speak with a Representative of the Richmond County Sheriff's Office should they have questions about the policy.
5. The Undersigned Employee Acknowledges that by signing this document they Acknowledge that they have received the Richmond County Sheriff's Office "USERRA" Policy and that a copy of this Acknowledgment will be placed in their personnel file with the Richmond County Sheriff's Office.

I have this ____ of _____ 20____, received a copy of the Richmond County Sheriff's Office "USERRA" Policy.

Signature
Richmond County Sheriff's Office Employee

Printed Name

MANDATED AND FORMALIZED TRAINING AGREEMENT

(Revised 11/2016)

A. Definitions

- I. The individual whose name is printed below as the Employee in the "Attestation" section shall be hereinafter referred to as the "Employee."
- II. The Richmond County Sheriff's Office shall be hereinafter referred to as the "Sheriff's Office."
- III. "Formalized training" is defined to include any and all courses other than in-service training.
- IV. The total costs of training to include salary paid during training, tuition, and any and all other reasonable expenses shall be hereinafter referred to as "total costs."

B. Agreement

- I. Pursuant to O.C.G.A. § 35-8-22, any agency that hires a peace officer employed by the Sheriff's Office shall be responsible to reimburse the Sheriff's Office for all costs according to the following schedule:
 - a. If the agency hires the peace officer within 15 months after completing Basic Mandate Peace Officer, Jail Officer and Communications Officer training inclusive, or any other formalized training courses, the hiring agency shall be responsible for reimbursing 100% of all costs as outlined in section A.IV. above.
 - b. If the agency hires the peace officer during a period of 15 to 24 months after completing Basic Mandate Peace Officer, Jail Officer and Communications Officer training inclusive, or any other formalized training courses, the hiring agency shall be responsible for reimbursing 50% of all costs as outlined in section A.IV. above.
 - c. The Sheriff's Office, Augusta-Richmond County, and/or the State of Georgia shall submit an itemized, sworn statement to the hiring agency and, demand payment thereof, and enforce collection of such obligation through all available civil remedies and procedures.
- II. If the Sheriff's Office cannot recover from the hiring agency or the employee leaves employment without being hired by another agency, the employee shall be responsible to reimburse the Sheriff's Office for all costs according to the following schedule:
 - a. If the employee leaves employment, not including termination within 15 months after completing Basic Mandate Peace Officer, Jail Officer and Communications Officer training inclusive, or any other

formalized training courses, the employee shall be responsible for reimbursing 100% of all costs as outlined in section A.IV.

b. If the employee leaves employment, not including termination, from 15 to 24 months after completing Basic Mandate Peace Officer, Jail Officer and Communications Officer training inclusive, or any other formalized training courses, the employee shall be responsible for reimbursing 50% of all costs as outlined in section A.IV.

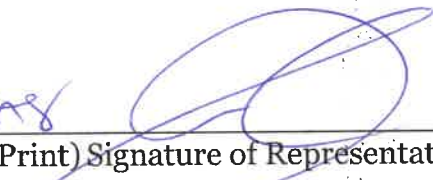
c. The Sheriff's Office, Augusta-Richmond County, and/or the State of Georgia shall submit an itemized, sworn statement to the employee, demand payment thereof, and enforce collection of such obligation through all available civil remedies and procedures.

III. The provisions of this agreement may be waived by the Sheriff in writing due to mitigating circumstances which would make enforcement of this agreement unreasonable.

C. Attestation

This agreement is entered into freely and voluntarily, and I am fully aware of all obligations contained within this agreement.

MARK, BRENDA M.  14 January 22
Employee Name (Please Print) Signature of Employee Date

Deanna Carney  1-14-22
Agency Representative (Please Print) Signature of Representative Date

EMPLOYEE INFORMATION SHEET:

Name: Brenda M. Maith

Address: [REDACTED] Augusta, Ga. 30906

Phone: [REDACTED]

SSN: [REDACTED]

Hire Date: 01/22/22

Orientation: Monday, January 24, 2022 @ 8:45am (See Orientation sheet for Location)

Date to Report: Tuesday, January 25, 2022 @ 8:00am (400 Walton Way- park across the street – call Records at 706-821-1010 when you get here and they will you in the front door)

GCIC Training Thursday, January 27, 2022 8:30am – 5:00pm @ Information Technology
535 Telfair St. Suite 2000 Augusta, Ga. 30901

Assigned Shift: TBA

Supervisor: Sgt. Dupass

Salary (bi-weekly): \$ 1,344.84 **Salary (annual):** \$ 34,965.84

First Check: 02/11/22 Your 1st check is a paper check which you will pick up on 02/11/22

Computer #: D026

P.O.S.T. PAPERWORK – Susan Epps (706-821-1120)

FINGERPRINTS & PHOTO Jail Administration
Charles B. Webster Detention Center, 1941 Phinizy Road 706-821-1101 Go to the Glass door to the RIGHT of the Flag Pole/ Let the Deputy know that you are a New Hire

ROAD DEPUTIES

UNIFORMS Ttreon Bush (Quartermaster)
Warehouse building behind Red Lobster-
Enter through gates via Walton Way

SWEARING-IN Wednesday, January 19, 2022 @ 9:00am **Be there by 8:30am**
Judge Harry B. James, III
Probate Court
Augusta Judicial Center
735 James Brown Blvd. Suite 1000
(Do not wear uniform)

Brenda Maith NHP

Revised 12/16/13
Previous Form Obsolete/Do Not Use

2020 NEW HIRE NOTIFICATION/CONFIRMATION

TO: Employment Manager, Human Resources

DATE: 01/14/22

FROM: Sheriff
(Department Name)

5012
(Department #)

Brenda M. Maith has been selected for consideration in the vacancy below. If hiring requirements are met, the Human Resources Department will advise as soon as possible. All new employees will attend orientation on the Monday of the new pay period. Please circle the orientation date below. (No employee will be entered on payroll or start work prior to orientation).

Job Title	Records Clerk
PCN	SRI82NN005
Pay Class (100, 200, 300, 600)	100
Pay Grade	9
Annual Salary (15% or more above minimum of pay grade requires Commission approval letter)	\$ 34,965.84
Bi-weekly Salary	\$ 1,344.84
Hourly Rate	\$ 16.01
Allowance (example: clothing, car, etc.)	
Hours Per Day	12Hrs.
Pay Rule (auto deduct lunch, comp or overtime, etc.)	12hrs.:60Mins A/D
Name/ID of Employee Being Replaced	M. Horton / 20359

2022

JANUARY 10 <u>24</u> FEBRUARY 7 21 MARCH 7 21 APRIL 4 18 MAY 2 16 31 JUNE 13 27	JULY 11 25 AUGUST 8 22 SEPTEMBER 6 19 OCTOBER 3 17 31 NOVEMBER 14 28 DECEMBER 12
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 Signature of Department Director/Elected Official

01/14/22

 Date

Augusta, Georgia

Job Description

Approved Title: Records Bureau Clerk
 Working Job Title: Records Clerk
 Department: Sheriff (5012)
 Reports To: Records Bureau Sergeant

Job Code: 82NN FLSA Classification: Non-exempt
 Pay Grade: 09 Date Revised: June 12, 2018
 Original Date Prepared: August 25, 1997

Does the Position Have Direct Reports? Yes No
 If Yes, What is the Title of the Position that Reports to this Position:
 Is the Position Safety Sensitive? Yes No

GENERAL SUMMARY: Provides clerical support, maintains records, and disseminates information within the guidelines of state and federal laws, departmental rules and regulations, County ordinances, Public Information and Privacy Acts, and GCIC/NCIC. Reports to the Sergeant or other designated person and works with co-workers, the public, law enforcement agencies, attorneys, and court personnel to provide administrative support.

KEY RESPONSIBILITIES AND PERFORMANCE STANDARDS

Percentages	TYPICAL CLASS ESSENTIAL DUTIES:
40 %	Merge field reports into local computer, checking for accuracy and adding additional fields to the computer system, as well as indexing accident report information.
40 %	Enters, cancels, clears, modifies, files into state/federal computer, as well as operating two-way radio.
5 %	Take in copy monies, and writes cash bond receipts for citations.
5 %	Assists in checking in and separating incoming paperwork, as well as checking in property for safe-keeping.
5 %	Enters and updates house watch requests and daily bulletin on the County's Intranet computer system.
5 %	Assists general public or other law enforcement agencies by phone or in person, and serves as resource to department personnel, and processes incoming daily mail.
As Required	Performs other duties of a similar nature or level.

100% Total: 100

(This section's percentage must total 100%).

POSITION SPECIFIC RESPONSIBILITIES MIGHT INCLUDE:

- Enters reports into the state/federal computer system.

REQUIRED MINIMUM QUALIFICATIONS:

Education: High School diploma, trade school, or G.E.D.

Experience: 2 - 3 years of experience in a similar position, or sufficient experience to perform the principal duties and responsibilities.

Knowledge/Skills/Abilities:

- Considerable knowledge of modern office practices and procedures, filing and record systems, and NCIC/GCIC computer system.
- Familiarity with departmental rules and regulations, state and federal laws, Public Information and Privacy Acts, GCIC guidelines, and County ordinances.
- Proficiency in interpersonal relations and basic mathematical calculations.
- Mastery of operating a computer, copier, cash register, police radio, and standard office equipment.
- Good communication skills, both oral and written.
- Demonstrated ability to work independently.

Skills:

- Typing/Keyboarding (35 words per minute - minimum)

Certification: GCIC Certification

OTHER:

Does this position require staff call up in an emergency situation? Yes No
Is travel from office to other locations required of this position? Yes No
If yes, what is the percentage of travel involved? Less than 50%? Yes No More than 50%? Yes No

PHYSICAL REQUIREMENTS:

Depending upon area of assignment:
Positions in this class typically require: walking, pushing, pulling, lifting, fingering, grasping, feeling, talking, hearing, seeing and repetitive motions. Work is performed in an office setting.

Light Work: Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or negligible amount of force constantly to move objects. If the use of arm and/or leg controls requires exertion of forces greater than that for Sedentary Work and the worker sits most of the time, the job is rated for Light Work.

FINANCIAL RESPONSIBILITY:



Is this position involved in a budgetary or financial approval responsibility? Yes No
If yes, please indicate size of budget or financial approval responsibility in annual dollar amount: \$ 0

TRAINING & SUPERVISORY RESPONSIBILITY:

How many people are being supervised or trained? None
One staff Yes No Two to five staff Yes No Six to ten staff Yes No More than ten staff Yes No

The preceding job description has been designed to indicate the general nature and level of work performed by employees within this classification. It is not designed to contain or be interpreted as a comprehensive inventory of all duties, responsibilities, and qualifications required of employees to this job.

REVIEW/APPROVALS

Employee (Print Name)	Date
	<u>1-18-2022</u>
Line or Staff Management	Date
	<u>1-18-2022</u>
Department Director	Date
Compensation Administration Staff	Date
HR Director	Date



HUMAN RESOURCES NEW HIRE QUESTIONNAIRE FORM

S.S. #: [redacted] NAME: Maith Brenda M. SUFX: [redacted]

ADDRESS: [redacted] Augusta Ga. 30906

DATE OF BIRTH: [redacted] 1960 HOME PHONE #: () CELL PHONE #: [redacted]

SEX: [] MALE [x] FEMALE U.S. CITIZEN: [x] YES [] NO MARITAL STATUS: [] SINGLE [x] MARRIED [] DIVORCED

RACE: [] WHITE [x] BLACK OR AFRICAN AMERICAN [] HISPANIC OR LATINO [] ASIAN [] NATIVE HAWAIIAN OR PACIFIC ISLANDER [] AMERICAN INDIAN OR ALASKAN NATIVE [] TWO OR MORE RACES

HIGHEST LEVEL OF EDUCATION COMPLETED (PLEASE CHECK ONE):

HIGH SCHOOL: [] 9 [] 10 [] 11 [] 12 [] GED COLLEGE: [] 1 [x] 2 [] 3 [] 4 GRAD SCHOOL: [] 1 [] 2 [] 3 [] 4

WERE YOU PREVIOUSLY EMPLOYED BY ANY DEPARTMENT IN AUGUSTA-RICHMOND COUNTY? [] YES [x] NO IF YES, DATE?

DO YOU HAVE ANY RELATIVES EMPLOYED WITH AUGUSTA-RICHMOND COUNTY? [] YES [x] NO IF YES, NAME: DEPT: RELATION: NAME: DEPT: RELATION:

IN CASE OF EMERGENCY PLEASE NOTIFY: NAME: [redacted] Relation: Spouse PHONE NUMBER: [redacted]

***SIGNATURE: [Signature] DATE: 14 January 20

BELOW IS FOR HUMAN RESOURCES ONLY

RE-HIRE? [] YES [] NO (IF YES, EMP ID #:) NEW EMP ID: STATUS: HIRE DATE: BARG UNIT: CALENDAR: GENDER: RACE: LOC (DEPT 3-DIGIT ABB): MARITAL STATUS: PAY CLASS: PCN: TITLE: BEGIN PAY DATES: HOURS PER DAY: DAYS PER WEEK: JOB CODE: SALARY GRADE: ANN SALARY: \$ BI-WKLY RATE OF PAY: \$ SUPPL PAY: \$ FED TAX (S, M, X, E): #OF DEP: ADD AMT: \$ ST TAX (S, M, H, E): (IF MARRIED, [] MJ [] MS [] M) #OF DEP: ADD AMT: \$

SUBSTANCE ABUSE COVERAGE FORM

I, Brenda M. Maith, have read and understand the below Richmond County Substance Abuse Policy.

I further understand that the use, possession, sale or distribution of alcohol, drugs, or controlled substances in the workplace is strictly prohibited.

For purposes of this policy "drugs or controlled substance" includes legal and illegal (street) drugs taken for non-medical reasons. It does not include prescription medication taken in accordance with a physician's instructions. I also understand that the presence of such substances in my system during work hours places unacceptable risk and burden on the safe and efficient operation of my job, and consequently, is strictly forbidden.

I also understand that if arrested and/or convicted for off-the-job drug and alcohol activities, including driving under the influence, some persons in some job assignments may have action taken against them, taking into consideration among other things, the nature of the charge, job assignment, and record with the County.

I also understand, in connection with the Richmond County Substance Abuse Program, that "for reasonable cause", (paragraph F page 2 - Annex B of the Safety/Risk Management Manual adopted April 29, 1987) I am subject to testing for the presence of drugs and alcohol in my system.

I fully understand that my cooperation with, and adherence to, Richmond County's Policies and Procedures regarding substance abuse are conditions of my continued employment and that, if I violate, or am insubordinate by refusing to cooperate with any of these policies and procedures, I am subject to discipline, up to and including discharge.

SIGNATURE: 

DATE: 14 January 22

AUGUSTA-RICHMOND COUNTY
USE OF POLYGRAPH EXAMINATIONS

SECTION I: POLICY

A. This policy is to be followed in the utilization of polygraph examinations whenever they are used as part of an investigation of alleged impropriety or misconduct by officers, employees, or agents of Richmond County, Georgia.

B. All Richmond County employees or agents are required to cooperate with supervisors and investigators in the process of conducting investigations of, incidents of, and reports alleging impropriety or misconduct on the part of any officer, employee, or agent including, but not limited to, the providing of written or oral testimony under oath and submission to an examination by polygraph.

C. Supervisory personnel investigating impropriety or misconduct by employees, investigators employed by Richmond County or investigative agents of other organizations and agencies specifically approved and commissioned to undertake an internal investigation of any Richmond County operated or funded activity, are authorized to employ polygraph examinations.

D. Polygraph examinations may be administered only by persons employed as polygraph examiners by a law enforcement agency or by persons licensed by the Georgia Board of Polygraph Examiners or licensed in some other state to conduct such examinations. The questions asked in any polygraph examination must relate narrowly and directly to the subject's participation in the alleged impropriety or misconduct under investigation or to his knowledge of information pertaining to such impropriety or misconduct.

E. Refusal of an order to submit to a polygraph examination under the circumstances covered in this policy shall be considered to be refusal to follow a direct order and shall constitute cause for initiation of adverse action based upon insubordination.

TO: WHOM IT MAY CONCERN
SUBJECT: USE OF POLYGRAPH EXAMINATION

I, Brenda M. Maith an employee of Richmond County Georgia, have read Annex B to the Richmond County Policy and Procedures Manual, USE OF POLYGRAPH EXAMINATION. I understand the contents of this annex and how it applies to me in my employment by Augusta-Richmond County.



(Signature)

14 January 22

(Date)


(Witness)

1-14-22

(Date)

**GEORGIA CRIME INFORMATION CENTER
AWARENESS STATEMENT**

Access to Criminal Justice Information, as defined in GCIC Council Rule 140-1-.02 (amended), and dissemination of such information are governed by state and federal laws and GCIC Council Rules. Criminal Justice Information cannot be accessed or disseminated by any employee except as directed by superiors and as authorized by approved standard operating procedures which are based on controlling state and federal laws, relevant federal regulations, and the Rules of the GCIC Council.

O.G.C.A. §35-3-38 establishes criminal penalties for specific offenses involving obtaining, using, or disseminating criminal history record information except as permitted by law. The same statute establishes criminal penalties for disclosing or attempting to disclose techniques or methods employed to ensure the security and privacy of information or data contained in Georgia criminal justice information systems.

The Georgia Computer Systems Protection Act (O.C.G.A. §16-9-90 et seq) provides for the protection of public and private sector computer systems, including communications links to such computer systems. The Act establishes four criminal offenses, all major felonies, for violations of the Act: Computer Theft, Computer Trespass, Computer Invasion of Privacy, and Computer Forgery. The criminal penalties for each offense carries maximum sentences of fifteen 15 years in prison and/or fines up to \$50,000.00, as well as possible civil ramifications. The Act also establishes Computer Password Disclosure as a criminal offense with penalties of one (1) year in prison and/or a \$5000.00 fine.

The Georgia Criminal Justice Information System Network is operated by the Georgia Crime Information Center in compliance with O.C.G.A. §35-3-31. All databases accessible via CJIS Network terminals are protected by the Computer Systems Protection Act. Similar communications and computer systems operated by municipal/county governments are also protected by the Act.

By my signature below, I acknowledge that I have read and understand this Awareness Statement.

Print Name: Brenda M. Maith

Signed:  _____ Date: 11 January 22

Witnessed:  _____ Date: 1-14-22

Direct Deposit Notification Form

To be signed by all new hires and rehires on or after November 15, 2011

In accordance with the Mandatory Direct Deposit policy approved by the Augusta Richmond Commission on November 15, 2011, any person hired or rehired as an employee of Augusta, Georgia on or after November 15, 2011 is required to accept all payroll related payments by direct deposit. The policy can be found on the Augusta Finance department's website.

I understand that as a condition of employment, I must comply with the policy and enroll in direct deposit on the first day of orientation. If I am unable to establish a bank account, I will provide a letter from a banking institution stating that fact. In that case, I agree to receive my payroll payments thru the debit card program administered by the institution where the Augusta payroll account resides, currently Bank of America (which may be subject to change).

Employee Name (please print) MAITH, BRENDA M.

Employee Signature  Date 14 January 22

To be completed by Human Resources:

Employee ID number _____ Position title: _____

Department _____ Date of Hire: _____

This form to be filed in the employee's permanent file.



1811004012

STATE OF GEORGIA EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE

1a. YOUR FULL NAME: BRENDA M. MAITH
1b. YOUR SOCIAL SECURITY NUMBER: [REDACTED]
2a. HOME ADDRESS: [REDACTED]
2b. CITY, STATE AND ZIP CODE: AUGUSTA, GA 30902

PLEASE READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING LINES 3 - 8

3. MARITAL STATUS

(If you do not wish to claim an allowance, enter "0" in the brackets beside your marital status.)

- A. Single: Enter 0 or 1 []
B. Married Filing Joint, both spouses working: Enter 0 or 1 [1]
C. Married Filing Joint, one spouse working: Enter 0 or 1 or 2 []
D. Married Filing Separate: Enter 0 or 1 []
E. Head of Household: Enter 0 or 1 []

4. DEPENDENT ALLOWANCES []

5. ADDITIONAL ALLOWANCES [] (worksheet below must be completed)

6. ADDITIONAL WITHHOLDING \$ _____

WORKSHEET FOR CALCULATING ADDITIONAL ALLOWANCES

(Must be completed in order to enter an amount on step 5)

1. COMPLETE THIS LINE ONLY IF USING STANDARD DEDUCTION:

Yourself: [] Age 65 or over [] Blind
Spouse: [] Age 65 or over [] Blind Number of boxes checked _____ x 1300 _____ \$ _____

2. ADDITIONAL ALLOWANCES FOR DEDUCTIONS:

- A. Federal Estimated Itemized Deductions (If Itemizing Deductions) _____ \$ _____
B. Georgia Standard Deduction (enter one): Single/Head of Household \$4,600
Each Spouse \$3,000 _____ \$ _____
C. Subtract Line B from Line A (If zero or less, enter zero) _____ \$ _____
D. Allowable Deductions to Federal Adjusted Gross Income _____ \$ _____
E. Add the Amounts on Lines 1, 2C, and 2D _____ \$ _____
F. Estimate of Taxable Income not Subject to Withholding _____ \$ _____
G. Subtract Line F from Line E (if zero or less, stop here) _____ \$ _____
H. Divide the Amount on Line G by \$3,000. Enter total here and on Line 5 above _____

(This is the maximum number of additional allowances you can claim. If the remainder is over \$1,500 round up)

7. LETTER USED (Marital Status A, B, C, D, or E) B TOTAL ALLOWANCES (Total of Lines 3 - 5) 1
(Employer: The letter indicates the tax tables in Employer's Tax Guide)

8. EXEMPT: (Do not complete Lines 3 - 7 if claiming exempt) Read the Line 8 instructions on page 2 before completing this section.

- a) I claim exemption from withholding because I incurred no Georgia income tax liability last year and I do not expect to have a Georgia income tax liability this year. Check here []
b) I certify that I am not subject to Georgia withholding because I meet the conditions set forth under the Servicemembers Civil Relief Act as provided on page 2. My state of residence is _____ My spouse's (servicemember) state of residence is _____. The states of residence must be the same to be exempt. Check here []

I certify under penalty of perjury that I am entitled to the number of withholding allowances or the exemption from withholding status claimed on this Form G-4. Also, I authorize my employer to deduct per pay period the additional amount listed above.

Employee's Signature [Signature] Date 14 January 22

Employer: Complete Line 9 and mail entire form only if the employee claims over 14 allowances or exempt from withholding. If necessary, mail form to: Georgia Department of Revenue, Withholding Tax Unit, 1800 Century Blvd NE, Suite 8200, Atlanta, GA 30345

9. EMPLOYER'S NAME AND ADDRESS: EMPLOYER'S FEIN: _____

EMPLOYER'S WH#: _____

Do not accept forms claiming additional allowances unless the worksheet has been completed. Do not accept forms claiming exempt if numbers are written on Lines 3 - 7.

Employee's Withholding Certificate

Department of the Treasury
Internal Revenue Service

▶ Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.
▶ Give Form W-4 to your employer.
▶ Your withholding is subject to review by the IRS.

2022

Step 1: Enter Personal Information	(a) First name and middle initial <i>BRENDA Ann McATEE</i>	Last name <i>MCATEE</i>	(b) Social security number [REDACTED]
	Address [REDACTED]		▶ Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov .
	City or town, state, and ZIP code <i>AUGUSTA GA 32902</i>		
	(c) <input type="checkbox"/> Single or Married filing separately <input checked="" type="checkbox"/> Married filing jointly or Qualifying widow(er) <input type="checkbox"/> Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

Complete Steps 2-4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, when to use the estimator at www.irs.gov/W4App, and privacy.

**Step 2:
Multiple Jobs
or Spouse
Works**

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.
Do **only one** of the following.

(a) Use the estimator at www.irs.gov/W4App for most accurate withholding for this step (and Steps 3-4); or
(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; or
(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld . . . ▶

TIP: To be accurate, submit a 2022 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

Complete Steps 3-4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3-4(b) on the Form W-4 for the highest paying job.)

Step 3: Claim Dependents	If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly): Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$ _____	
	Multiply the number of other dependents by \$500 ▶ \$ _____	
	Add the amounts above and enter the total here	3 \$ <i>0</i>
Step 4 (optional): Other Adjustments	(a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income	4(a) \$ _____
	(b) Deductions. If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here	4(b) \$ _____
	(c) Extra withholding. Enter any additional tax you want withheld each pay period	4(c) \$ _____

**Step 5:
Sign
Here**

Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

▶ *[Signature]* Employee's signature (This form is not valid unless you sign it.) ▶ *14 January 22* Date

Employers Only	Employer's name and address	First date of employment	Employer identification number (EIN)



Employment Eligibility Verification
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-9
 OMB No. 1615-0047
 Expires 10/31/2022

▶ **START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.**

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Attestation *(Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)*

Last Name (Family Name) MIRAH		First Name (Given Name) BRENDA		Middle Initial ML	Other Last Names Used (if any)	
Address (Street Number and Name) [REDACTED]			Apt. Number	City or Town AUGUSTA	State GA	ZIP Code 30906
Date of Birth (mm/dd/yyyy) 1/19/60	U.S. Social Security Number [REDACTED]		Employee's E-mail Address [REDACTED]		Employee's Telephone Number [REDACTED]	

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following boxes):

<input checked="" type="checkbox"/> 1. A citizen of the United States	
<input type="checkbox"/> 2. A noncitizen national of the United States <i>(See instructions)</i>	
<input type="checkbox"/> 3. A lawful permanent resident (Alien Registration Number/USCIS Number): _____	
<input type="checkbox"/> 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): _____ Some aliens may write "N/A" in the expiration date field. <i>(See instructions)</i>	
<p><i>Aliens authorized to work must provide only one of the following document numbers to complete Form I-9: An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.</i></p> <p>1. Alien Registration Number/USCIS Number: _____ OR 2. Form I-94 Admission Number: _____ OR 3. Foreign Passport Number: _____ Country of Issuance: _____</p>	QR Code - Section 1 Do Not Write In This Space

Signature of Employee 	Today's Date (mm/dd/yyyy) 01/14/2022
---------------------------	--

Preparer and/or Translator Certification (check one):
 I did not use a preparer or translator. A preparer(s) and/or translator(s) assisted the employee in completing Section 1.
(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)

I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator		Today's Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	State ZIP Code

STOP *Employer Completes Next Page* **STOP**




Employment Eligibility Verification
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-9
 OMB No. 1615-0047
 Expires 10/31/2022

Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.")

Employee Info from Section 1	Last Name (Family Name)	First Name (Given Name)	M.I.	Citizenship/Immigration Status
-------------------------------------	-------------------------	-------------------------	------	--------------------------------

List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title		Document Title		Document Title
Issuing Authority		Issuing Authority <i>Georgia</i>		Issuing Authority
Document Number		Document Number [REDACTED]		Document Number [REDACTED]
Expiration Date (if any) (mm/dd/yyyy)		Expiration Date (if any) (mm/dd/yyyy) [REDACTED] <i>2029</i>		Expiration Date (if any) (mm/dd/yyyy)
Document Title		Additional Information		QR Code - Section 2 Do Not Write In This Space 
Issuing Authority				
Document Number				
Expiration Date (if any) (mm/dd/yyyy)				
Document Title				
Issuing Authority				
Document Number				
Expiration Date (if any) (mm/dd/yyyy)				

Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy): *01/24/2022* (See instructions for exemptions)

Signature of Employer or Authorized Representative <i>[Signature]</i>		Today's Date (mm/dd/yyyy) <i>01/14/2022</i>	Title of Employer or Authorized Representative Administration Assistant	
Last Name of Employer or Authorized Representative <i>Carreras</i>	First Name of Employer or Authorized Representative Deanna	Employer's Business or Organization Name Richmond Co. Sheriff's Office		
Employer's Business or Organization Address (Street Number and Name) 400 Walton Way		City or Town Augusta	State GA	ZIP Code 30901

Section 3. Reverification and Rehires (To be completed and signed by employer or authorized representative.)

A. New Name (if applicable)			B. Date of Rehire (if applicable)	
Last Name (Family Name)	First Name (Given Name)	Middle Initial	Date (mm/dd/yyyy)	

C. If the employee's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes continuing employment authorization in the space provided below.

Document Title	Document Number	Expiration Date (if any) (mm/dd/yyyy)
----------------	-----------------	---------------------------------------

I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	Name of Employer or Authorized Representative
--	---------------------------	---



RICHMOND COUNTY SHERIFF'S OFFICE

Sheriff Richard Roundtree

Law Enforcement Center

400 Walton Way

Augusta, GA 30901

Phone: 706.821.1000 Fax: 706.821.1064

Polygraph Waiver

By affixing my signature below, I understand that I am submitting voluntarily to a Richmond County Sheriff's Office sponsored polygraph examination for the purpose of employment. There is a one hundred dollar (\$100.00 Cash) administration fee due to the polygraph operator prior to him administering the polygraph examination. Should applicant successfully complete the polygraph examination, the administration fee will be returned and the Richmond County Sheriff's Office will be responsible for the cost of the polygraph examination. If the applicant should fail the polygraph examination during any stage of the examination, the administration fee is forfeited to the polygraph operator.

North, Brenda M.

Print Name

[Signature] 12-15-21

Signature

Date

[Signature]

Witness



RICHMOND COUNTY SHERIFF'S OFFICE

Sheriff Richard Roundtree

Law Enforcement Center

400 Walton Way

Augusta, GA 30901

Phone: 706.821.1000 Fax: 706.821.1064

APPLICANT BOARD REVIEW SHEET (INTERVIEW 1)

DATE: 12/15/21

APPLICANT: Brenda Maith

BOARD MEMBERS:

	IN ATTENDANCE		CONTINUE PROCESS		INITIAL
	YES	NO	YES	NO	
<i>Mr. Jimmy Jackson</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>[Signature]</i>
<i>Aash Sutton</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>AS</i>
<i>A. McLaughlin</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>AM</i>
<i>F. Dupress</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>FD</i>

REMARKS:

Very knowledgeable in Security awareness and confidentiality. good people skills.

Has great Experience in Customer Service and work with people and other departments

Computer savvy, personable, willing to work ^{extra} with fellow employees if needs assisting



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Interviewee: Brenda Maith

Interview Time: 02:00

Date: 12/15/2021

Interviewer: Ashley Shetter

Amb

1. What experience do you have dealing with the public whether it be in person or through telephone conversation? *Face to Face and on the phone Customer Service Computer Analyst Zoom & web*

Amb

2. What type of skills do you think are necessary to work as a records clerk? *People Skill Leave Passes on outside, She felt a warmth when coming to the window for background check.*

Police

3. Have you ever been in a situation where the confidentiality of data under your wing was at risk? *Events at Risk, but knows the Importance of Confidentiality 30 Years Experience, about to Retire, Do not want to stay home. Worked w/ Legal Services @ Augusta central Regional to IT*

Police

4. This position requires you to work 12 hour shifts either on a day shift or night shift, are you able to do so? *Open to work. 12 /*

A

5. How do you prioritize your workload on the daily? *By Request or if a priority comes up, we will take care of that 1st*

#

6. On a scale of 1-10, with 10 being the highest, rank your ability to multi-task? *8*

A

7. What is the one thing that made you decide that you wanted to apply for a position with this agency? *Warmth / 1st Experience*



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either

Interviewee: Maith

Interview Time: 2:00

Date: 12/15/21

Interviewer: A McLaughlin

1. What experience do you have dealing with the public whether it be in person or through telephone conversation? Computer analyst. Face to face + telephone keeps line of communication open and has prior experience in retail. Has supervisory experience as well. Leadership skills.

2. What type of skills do you think are necessary to work as a records clerk?

People skills, learn to separate work, continue to smile through it. Felt warm energy when visiting records in the past for background checks. / know how to talk to people + show empathy

3. Have you ever been in a situation where the confidentiality of data under your wing was at risk?

Yes. being in IT + security. can see into computers and info that people look up. Retiring from IT ~~for~~^{after} 30 years.

4. This position requires you to work 12 hour shifts either on a day shift or night shift, are you able to do so?

Yes. NO issues. Prefers morning shift if possible.

5. How do you prioritize your workload on the daily?

based on priority. will respond to things first that take preference. is able to decide what is more important

6. On a scale of 1-10, with 10 being the highest, rank your ability to multi-task?

8. Does alot of multi tasking with current job.

7. What is the one thing that made you decide that you wanted to apply for a position with this agency?

Warmth. explained in question 2. Met with Sgt. Ports



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either location

Interviewee: Brenda Maith Interview Time: 2:00 Date: 12/15/21
/ 2:08
Interviewer: Dupass

- A 1. What experience do you have dealing with the public whether it be in person or through telephone conversation?
telephone, working face to face, enjoys helping peers, ^{helps cus} via telephone 30 year experience.
- A 2. What type of skills do you think are necessary to work as a records clerk?
people skills, leave your problems @ the door, empathy, sympathy
- F 3. Have you ever been in a situation where the confidentiality of data under your wing was at risk?
Everyday. It's we see things what we see/don't ~~know~~ want to see, HIPPA knowledge.
- F 4. This position requires you to work 12 hour shifts either on a day shift or night shift, are you able to do so?
Sure. Interviewee prefers days
- AS 5. How do you prioritize your workload on the daily?
currently all request are put in from a system that is worked on prioritizes @ highest level first and then works from there
- AS 6. On a scale of 1-10, with 10 being the highest, rank your ability to multi-task?
8.
- AS 7. What is the one thing that made you decide that you wanted to apply for a position with this agency?
Felt new with in CSR @ Records, clerk. very helpful. ^{sup} Parts was. very helpful w/ her

200



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APPLICATION SCREENING FORM

Applicant's Name: Brenda Maith

Position Applied For: Records

RATING TRAITS/CHARACTERISTICS

POSITIVES

Meets Job Requirements

Educational Level

Physical Fitness

Prior Experience

Military Service (Honorable)

Special Skills

Related Certifications

NEGATIVES

Typos on Application

Large Breaks in Work History

Minimum/Low Compass Score

Bad Driving Record

Criminal History

Additional Comments:

Recommendation (Check One Box Only):

	Member 1	Member 2	Member 3
Proceed To Interview	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maybe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No Further Process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ranking	1	1	1

(1 -5 Scale - 5 Being the Highest)

1) Cap. Phyllis B. White

[Signature]
SIGNATURE

12-13-21
DATE

2) PRINT NAME

SIGNATURE

DATE

3)

PRINT NAME

SIGNATURE

DATE

Application Process II

Last Name	First Name	Middle Name	Suf
Maith	Brenda	M	
SS#	DL#	DOB:	
[REDACTED]	GA [REDACTED]	[REDACTED] 960	
Interview (Date):	12-15-21	Interviewed By:	Records Comm
Remarks:	proceed		
POST (Date):	12-13-21		
Remarks:	N/A		
Entrance Exam (Date):		Score:	
Polygraph (Date):	12-17-21	Examiner:	T. Faully
Remarks:	Passed		
Range:	/		
Background by:	SGT. N. MCCARTY		
Remarks:	GOOD CANDIDATE.		
Drug Screen:	1/10/22 passed	Physical	1/10/22 passed
No Further Process			
Approved Hire:	CAPT. PHOENIX B. WHITE 1-7-22		



Application for Employment Augusta, Georgia

HUMAN RESOURCES DEPARTMENT

ROOM 601, MUNICIPAL BUILDING, AUGUSTA, GEORGIA 30911

www.augustaga.gov JOB LINE: (706) 821-2305 PHONE: (706) 821-2303 FAX: (706) 821-2867

In order to be considered for a position, applications must be complete. You must **PRINT, SIGN** and **DATE** your application in **INK**.

Position Applying For <i>Records clerk</i>		Date <i>2 December 21</i>	
Name Last <i>MAITH</i>	First <i>Brenda</i>	MI <i>MI</i>	NU <i>NU</i>
Current Address [REDACTED]	City <i>AUGUSTA</i>	State <i>GA</i>	Zip Code <i>30906</i>
Telephone Number(s) [REDACTED]	()	()	()

Have you ever been employed with the City of Augusta or Richmond County before? Yes No
 If yes, Date _____ Position _____

On what date would you be available for work? *1/1/12*
 If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

If you are required to register with the Selective Service, can you show proof of registration? (Required of males ages 18 – 26.) Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you legally eligible to work in the U.S.? Yes No

Do you have any relatives employed with us? Yes No

If yes, Name _____ Relation _____ Dept _____

If yes, Name _____ Relation _____ Dept _____

Have you ever been convicted of, plead guilty or no contest to a misdemeanor? Yes No

If yes, please give date and explanation.

Have you ever been convicted of, plead guilty or no contest to a felony? Yes No

If yes, please give date and explanation.

**A misdemeanor or felony conviction will not necessarily disqualify a job candidate from being considered for a position, unless applicable by law.*

Education

High School				
School Name and Address <i>Louis Eastman High School - Lowry Walker Blvd Augusta, GA</i>				Did you graduate? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If not a high school graduate, do you have a GED?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Technical or Business Schools				
School Name and Address <i>Augusta S.T.C.</i>	Number of years attended <i>1</i>	Course of study <i>Accounting / clerical</i>	Did you graduate? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Degree obtained <i>Completed</i>
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Colleges/Universities				
School Name and Address <i>Augusta State</i>	Number of years attended <i>1 1/2</i>	Course of study <i>Business</i>	Did you graduate? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Degree obtained
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Augusta is an Equal Opportunity Employer and does not discriminate on the basis of race, religion, color, gender, age, national origin or disability. Applications are kept on file for 90 days.





Application for Employment Augusta, Georgia

References: List three (3) personal references who are not related to you and are not previous employers.

Name	Address	Phone Number	Years Known
Wanda K. Johnson	[REDACTED]	[REDACTED]	29
Ellie Evans	[REDACTED]	[REDACTED]	46
Lawrence M. Middleton	[REDACTED]	[REDACTED]	13
Denise Epps	[REDACTED]	[REDACTED]	

Employment History: List most recent or current job first: (please cover last eight (8) years, attach additional page if needed.)

Name of Organization East Central Regional Hosp.	Telephone (706) 910-8985	Dates Employed 2010 From mo/yr 1984 To mo/yr Ret. 12/12/12
Number and Street 100 Murrell Blvd	City State Zip Code Gainesville GA 30512	May we contact this employer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Official Job Title Computer Sys. Analyst	Name of Supervisor Stephen Johnson	Pay (hourly rate/salary) Starting Final
Describe Specific Job Duties Set up computers, software install, work with Windows Support: telephone, internet, etc.		
Reason for Leaving Retirement		
Name of Organization E CRH	Telephone (706) 790-2944	Dates Employed 2009 From mo/yr 2009 To mo/yr 2010
Number and Street 102 Murrell Blvd	City State Zip Code Gainesville GA 30512	May we contact this employer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Official Job Title Data Analyst	Name of Supervisor Ginger Benham	Pay (hourly rate/salary) Starting Final
Describe Specific Job Duties Input data into various databases, answer telephone, etc.		
Reason for Leaving Promotion		
Name of Organization E CRH	Telephone (706) 792-7177	Dates Employed 2005 From mo/yr 2005 To mo/yr 2007
Number and Street 102 Murrell Blvd	City State Zip Code Gainesville GA 30512	May we contact this employer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Official Job Title Executive Sec.	Name of Supervisor Thomas Davis	Pay (hourly rate/salary) Starting Final
Describe Specific Job Duties Worked directly for the H.K. Manager, kept schedule Scheduled meetings, Supv. to secretaries, etc.		
Reason for Leaving Promotion		

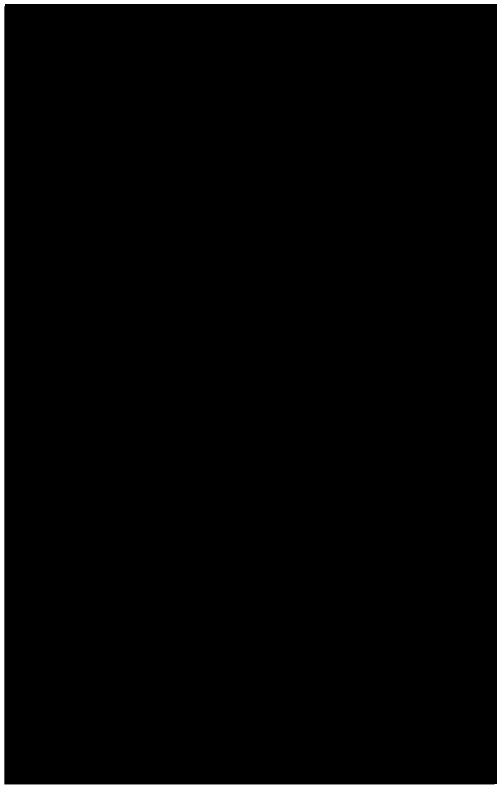
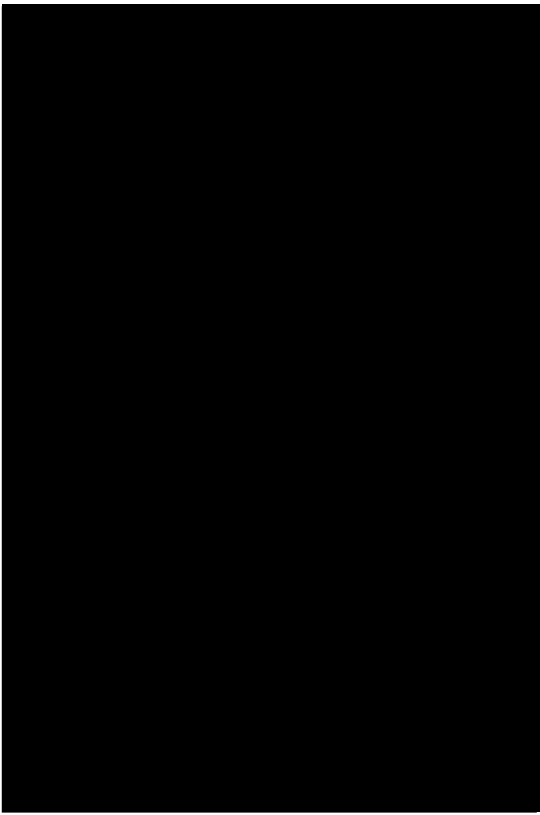
List any additional training, skills or equipment you are skilled in operating related to the position in which you are applying. (This may include computer applications, typing speed, a CDL license, or any other skills.)
 computers, internet, MS Office, MS Access, etc.

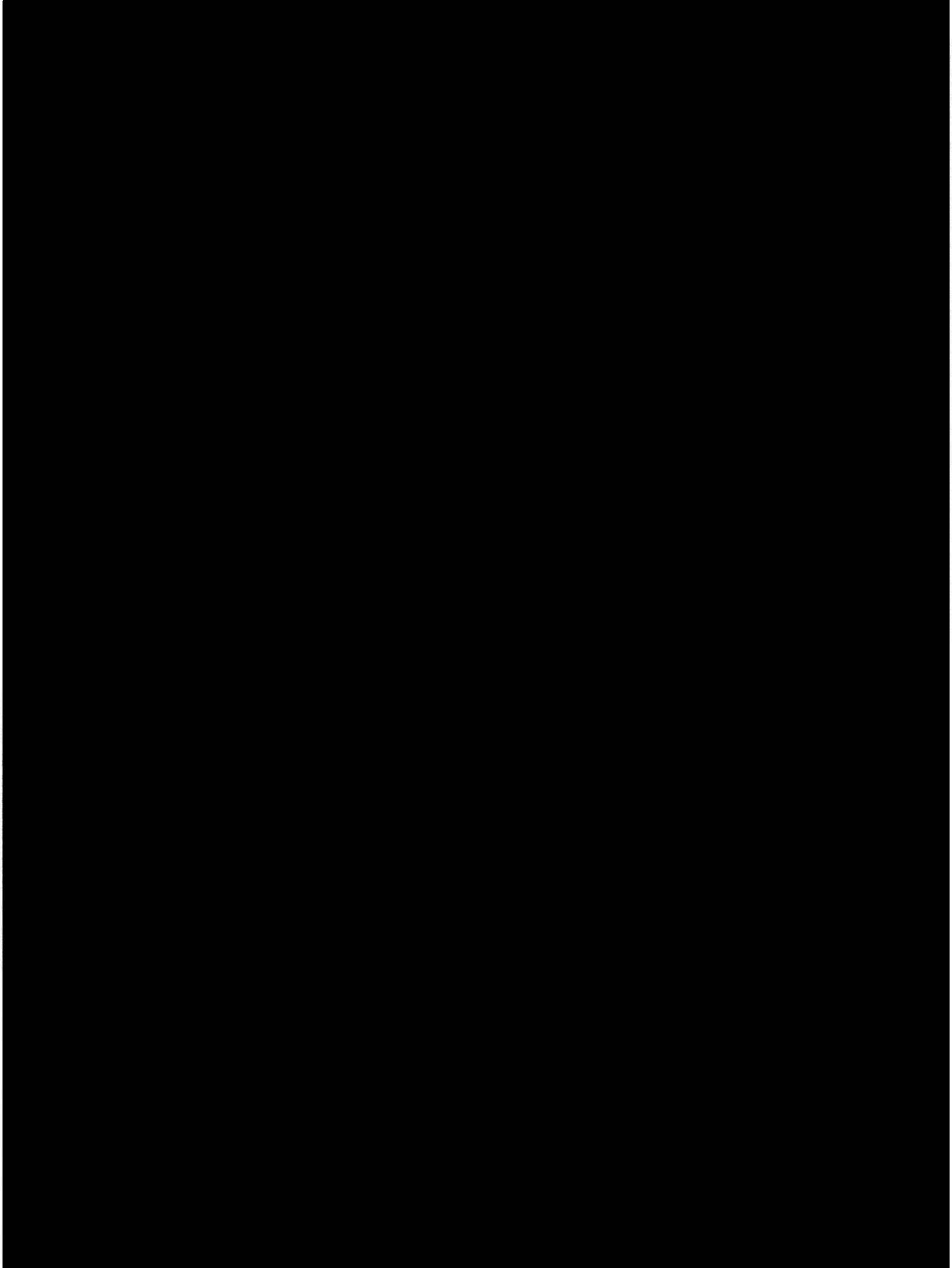
Authorization and Release

My signature on this application form attests to the fact that all information included is true to the best of my knowledge. I am aware that falsification/misrepresentation on any part of this application form and attached resume or credentials may disqualify me for employment or result in immediate dismissal, regardless of when discovered. I understand that any employment pursuant to this application shall be subject to the condition that I pass the pre-employment drug screening urinalysis test and that information regarding use of drugs may be disclosed to the appropriate county representative as a part of the employment process. I further understand that a post-offer of employment physical examination is also required for certain positions, and in those cases, employment is conditional upon successfully passing the examination. All medical information will be classified as confidential. I hereby authorize Augusta to investigate the information contained in my application, and to verify the information that I have submitted. I further authorize any past or present employer, law enforcement agency, or educational institution to release any information contained in my personnel file, police, or school record. I hereby release any individual providing requested information from all liability and agree not to sue for defamation or other claims based upon statements made to any representative of Augusta.

Signature of Applicant

Date
2 November 2011





RICHLAND COUNTY SCHOOL SYSTEM
STUDENT RECORDS
864 Broad Street
Augusta, Georgia 30901

December 2, 2021

To Whom It May Concern:

This is to certify that the following information was recorded on the school record in -
the Richmond County Public System. The Record is on file at 864 Broad Street, Augusta,
Georgia 30901.

NAME: Brenda Mills (Maith)

BIRTH DATE: [REDACTED] 1960

GRADUATION DATE: May 31, 1977

FATHER'S NAME:

MOTHER'S NAME:

OTHER INFORMATION RECORDED DURING STUDENT'S ATTENDANCE IN
SCHOOL:

See attached transcript record

Secretary,

Patricia Dunn

Sworn to and signed in my presence

2nd day of December, 2021.

Alice B. Ford

HIGH SCHOOL CUMULATIVE RECORD

Richmond County Schools, Augusta, Georgia

NAME: Mills, Brenda Gail Sex: F Place of Birth: Augusta Date of Birth: [REDACTED] 60
 ADDRESS: (Street & No.) [REDACTED] 17677 - 1029 - 8th Street
 Father's Name: [REDACTED] Mills Occupation: Painter
 Mother's Name: [REDACTED] Mills Occupation: Cook

STANDARDIZED TEST RECORD

Grade	Date	MILLS BRENDA		STUDENT NAME		STUDENT I.D.									
		M-1 CONCEPTS	M-2 PROBLEMS	M-TOT. MATH	C-COMPOSITE	MILLS BRENDA G									
		65 89	50 78	58 84	57 82	GRADE 11 TESTS OF ACADEMIC PROGRESS - FORM S CHR. AGE 1502 COMP. 34 READ. 44 MATH. 30 SEP 75 TEST DATE 51211284341 2 6 7 NPR SPR LPR NPR SPR LPR NPR SPR LPR NPR SPR LPR NPR SPR LPR									
		203139	71316	92024	82523	C.A.T. FORM 1 LEV F IOWA TESTS OF BASIC SKILLS FORM 5 LEV. 14 GRADE 8 TEST DATE 10/72 C. AGE 12/03 ID NO.									
		COGNITIVE ABILITIES TEST		VOCABULARY	R READING	L-1 SPELLING	L-2 CAPITALIZ	L-3 PUNCTUA	L-4 USAGE	L TOT. LANG	W-1 MAPS	W-2 GRAPHS	W-3 REFER.	W TOT. WORK	
		VERBAL 87	NON-VERBAL 85	41	69	74	96	55	81	65	88	39	68	64	88
		2140	4117	3636	3	6	83	954	5815	2727	2943	43	5	8	82743
		44	13	24	25	12	21	24	37	56	59	2	5	4	102422

EXTRA CURRICULAR ACTIVITIES

Organization	Honor Conferred or Won	Office Held	Class	Year
<u>Tkett</u>	<u>-</u>	<u>Member</u>	<u>11</u>	<u>1975-76</u>
<u>Stu. Council</u>	<u>-</u>	<u>Member</u>	<u>11</u>	<u>1975-76</u>

LAST MILLS		FIRST BRENDA		MI	GRADE	TEST DATE
24 27		28 20		24	12	DEC 76
COLLEGE BOARD ADMISSIONS TESTING PROGRAM						
Grade	Adv. Pl.	High	Medium	Low		
8	80	81	82	83		
9	90	91	92	93		
10	100	101	102	103		
11	110	111	112	113		
12	120	121	122	123		

CUMULATIVE ACADEMIC RECORD

School	Gr.	Yr.	Subject	1st	2nd	Av	Cr
<u>P.B. Jr. H.S.</u>	<u>8</u>	<u>Yr. 76</u>	<u>Phy. Ed.</u>	<u>85</u>	<u>86</u>	<u>85</u>	
			<u>Health</u>	<u>86</u>	<u>88</u>	<u>87</u>	
			<u>English</u>	<u>83</u>	<u>79</u>	<u>81</u>	
			<u>Home Econ.</u>	<u>79</u>			
			<u>Am. Hist.</u>	<u>85</u>	<u>89</u>	<u>87</u>	
			<u>Math</u>	<u>82</u>	<u>85</u>	<u>83</u>	
			<u>Yr. Av.</u>	<u>88.2</u>			
<u>S.B.F. Jr. H.S.</u>	<u>9</u>	<u>Yr. 74</u>	<u>Chorus</u>	<u>92</u>	<u>89</u>	<u>91</u>	<u>1/2</u>
			<u>English</u>	<u>83</u>	<u>87</u>	<u>85</u>	<u>1</u>
			<u>Gibus</u>	<u>78</u>	<u>87</u>	<u>84</u>	<u>1</u>
			<u>Pre-Algebra</u>	<u>72</u>	<u>81</u>	<u>77</u>	<u>1</u>
			<u>Home Ec.</u>	<u>86</u>	<u>86</u>	<u>86</u>	<u>1</u>
			<u>Science</u>	<u>85</u>	<u>91</u>	<u>88</u>	<u>1</u>
			<u>Yr. Av.</u>	<u>85.2</u>			
<u>Laney</u>	<u>10</u>	<u>Yr. 75</u>	<u>Algebra I</u>	<u>86</u>	<u>90</u>	<u>88</u>	<u>1</u>
			<u>P.E.</u>	<u>94</u>	<u>85</u>	<u>89</u>	<u>1/2</u>
			<u>English II</u>	<u>87</u>	<u>87</u>	<u>87</u>	<u>1</u>
			<u>Administrating II</u>	<u>90</u>	<u>92</u>	<u>91</u>	<u>1</u>
			<u>Biology</u>	<u>72</u>	<u>80</u>	<u>76</u>	<u>1</u>
			<u>Contm. History</u>	<u>93</u>	<u>93</u>	<u>93</u>	<u>1</u>
			<u>Yr. Av.</u>	<u>87.100</u>			
<u>Laney</u>	<u>11</u>	<u>Yr. 76</u>	<u>Geom.</u>	<u>69</u>	<u>33</u>	<u>51</u>	<u>0</u>
			<u>DANCE</u>	<u>85</u>	<u>89</u>	<u>86</u>	<u>1</u>
			<u>Chem.</u>	<u>48</u>	<u>88</u>	<u>88</u>	<u>1</u>
			<u>Am. Hist.</u>	<u>92</u>	<u>96</u>	<u>94</u>	<u>1</u>
			<u>English</u>	<u>77</u>	<u>84</u>	<u>81</u>	<u>1</u>
			<u>Typ I</u>	<u>89</u>	<u>89</u>	<u>89</u>	<u>1</u>
			<u>Yr. Av.</u>	<u>81.50</u>			
<u>Laney</u>	<u>12</u>	<u>Yr. 77</u>	<u>Alometry</u>	<u>76</u>	<u>73</u>	<u>75</u>	<u>1</u>
			<u>Typing II</u>	<u>92</u>	<u>93</u>	<u>92</u>	<u>1</u>
			<u>Physical</u>	<u>88</u>	<u>86</u>	<u>87</u>	<u>1</u>
			<u>Eng. II</u>	<u>82</u>	<u>93</u>	<u>89</u>	<u>1</u>
			<u>U.S. History</u>	<u>85</u>	<u>90</u>	<u>87</u>	<u>1/2</u>
			<u>Yearbk.</u>	<u>90</u>	<u>95</u>	<u>95</u>	<u>1</u>
			<u>Yr. Av.</u>	<u>87.3</u>			

ENTRANCE AND WITHDRAWAL RECORD

School Left	School Entered	Cause of Change	Date
<u>Hainsby</u>	<u>P.B. Jr. High</u>	<u>Promotion</u>	<u>8/72</u>
<u>Sand Bar Jr.</u>	<u>Laney H.S.</u>	<u>Promotion</u>	<u>8/74</u>
<u>Laney</u>		<u>Withdrawal</u>	<u>5-31-77</u>

ATTENDANCE SUMMARY

Year	Year	Year	Year	Year	Year
73-74	74-75	75-76	76-77	77-78	78-79
Ab. Td.	Ab. Td.	Ab. Td.	Ab. Td.	Ab. Td.	Ab. Td.
0/30	0 30	0 0	0 0	0-0	0-0
0/30	0 30	0 0	0 0	0-0	0-0
0/30	0 30	1 0	0 0	0-0	0-0
0/30	0 30	0 0	- -	0-0	0-0
0/30	0 30	0 0	- -	0-0	0-0
0/30	0 30	0 0	- -	0-0	0-0

Date of Graduation: 5-31-77 Standing in Class: 29 College Entered: _____
 Type of Diploma: _____ Number in Class: 230

Final Average - 86.23 Total units = 2 1/2

BRENDA M. MAITH

Augusta, Georgia 30906

PROFESSIONAL EXPERIENCE

East Central Regional Hospital (Computer System Analyst)

3/2012 – Present

Requisition equipment through a web based system titled "Order Now". Grant employees computer access and/or additional access. Grant and/or deny request for new technology. Make visits to various areas on campus to fulfill requests for new equipment (workstations/printers) as approved. Maintain record of missing/stolen equipment - ensure Hospital Security is notified and a report is taken from the end user. Install computers, network printers, video conference equipment, and various types of software. Ensures equipment operable and staff is properly trained. Assist with testing of various projects prior to being pushed out to staff (ex. EMR, KRONOS, Avatar, Windows 11, 10, 7, Anti-Virus Software, GroupWise to Outlook, Internet Explorer 11, Disabling Jump Drives and Auto-run features, LAN /WAN Transformation). Review/evaluate detailed monthly billing of equipment, data charges and disputes as necessary. Interact with the helpdesk to resolve outstanding tickets. Interface with staff to resolve computer issues via telephone or by office visit. Escort Dell Technician/Vendors on campus and serve as liaison for the hospital as needed for various projects. Decommission equipment as it (computers, laptops and printers) becomes outdated or destroyed. Update records in Maximo and other data bases to maintain inventory accuracy. Interface with staff to assist in determining equipment needs. Deactivate and remove computer access of employees that are no longer employed with the state. Communicate with hospital staff regarding Outages/Downtime (being on call-available). Equipment Movement and Storage – maintain appropriate level of equipment across campus. Computer Lab Maintenance – Ensure the computers in both labs (August and Gracewood campus) are operable. Ensures equipment is removed and data jacks deactivated in a timely manner when building are no longer used. Responsible for securing and maintaining equipment. Participate in weekly, bi-weekly, monthly conference calls and quarterly visits with sister hospitals. Also provides customer service to the employees of the State of Georgia.

East Central Regional Hospital (Operations Analyst-EL)

1/2008 – 2/2012

Data Management Department – Managed various departmental databases and filing of supporting critical forms. Tested new data collection instruments for accuracy. Assisted with maintenance of the facility website, analyzed data submitted and developed unique department web pages suggesting improvement alternatives for programs. Completed weekly and monthly crystal and excel reports. Interface with staff to resolve computer issues via telephone or by office visit. Assisted with teaching computer classes and installation of software. Requisitioned equipment, granted new employees computer access and also granted additional access to other employees as needed. Deactivate and remove computer access of employees that are no longer employed with the state. Computer Lab Maintenance – Ensure the computers in both labs (August and Gracewood campus) are operable. Assisted in the development of procedures for incorporating new system databases while ensuring the security of databases was maintained. Ensured the secure storage of surplus equipment while maintaining the accuracy of the equipment database.

**East Central Regional Hospital
Program Associate**

2/1/07 – 1/2008

Data Management Department – Maintained database for over 500 consumers on a daily basis. Completed weekly and monthly crystal and excel reports. Interface with staff to resolve computer issues via telephone or by office visit. Assisted with teaching computer classes and installation of software. Ensured the secure storage of surplus equipment while maintaining the accuracy of the equipment database. Worked with the development of the equipment database.

**East Central Regional Hospital
Program Associate**

6/2006 – 1/2007

Served as personal secretary to the Director of Human Resources (*Human Resource Management & Human Resource Development was consolidated, Director appointed*). Maintained calendar, scheduled appointments, arranged meetings and prepared agendas as well as copies for meeting. Attended and took minutes at meetings. Arranged travel arrangements. Independently solved problems based on knowledge of the department and the facility. Accurately maintained time records of twenty-one employees in the department. Requisitioned office supplies and equipment. Responded to incoming mail, phone calls and electronic requests; initiated and prepared documents. Taught computer software and basic typing classes. Independently prepared documents, personnel actions, statistical reports, graphs, policies, etc. Supervised four clerical workers.

**East Central Regional Hospital
Program Associate**

5/2004 – 6/2006

Manager of Human Resource Development - personal secretary/assistant. Served as liaison between the department and other campus offices (Human Resources Management, CEO's office, Business Office). Solved problems independently based on knowledge of the department and the hospital. Disbursed information/benefits and/or completed transactions according to department procedures. Responded to incoming mail, phone calls and electronic requests; initiated and prepared documents in support of the department. Researched and analyzed data; generated regular and ad hoc statistical and informational reports as requested. Maintaining all financial, personnel, and related records of the department. Served on various committees and task forces as required.

**Gracewood State School and Hospital
Program Assistant**

5/2003 – 5/2004

The Hospital name changed to East Central Regional Hospital (ECRH) Served as personal secretary to the Legal Services Officer. Maintained the schedule/calendar of the attorney, scheduled appointments with other attorneys and or legal firms, assisted with legal documents, handled of confidential documents, took dictation, maintained personnel records and the department budget. Ordered supplies, answered the telephone, prepared expense reports for reimbursement and maintained files. Served as liaison between the Legal Department and other campus offices (Human Resources Management, CEO's office, Business Office). Secured and distributed paychecks to department employees. Took minutes at various meetings. Prepared monthly/quarterly HIPAA and Grievance reports for the Region Office. Prepared other reports on an as needed basis. Assisted in CEO office as needed.

**Gracewood State School and Hospital
Program Assistant**

12/2001 – 05/2003

Served as secretary/assistant to the Director of Consumer Resources Unit (CRU). Maintained/prepared documents for the Director's signature, scheduled appointments, meetings; handled confidential materials. Attended and took minutes at the following monthly/bimonthly meetings: Human Rights Committee, Human Rights Sub-Committee, Comprehensive Behavior Plan and Continued Habilitation Committees. Prepared a monthly and quarterly report on the Comprehensive Behavior Committee and submitted to the Chief Executive Officer (CEO). Assisted the Director with two Gracewood Group Homes; attended weekly meetings on the recommended selection of clients for the homes. Notified parents, guardians and regional boards regarding dismissal of a client from Gracewood.

**Gracewood State School and Hospital
Secretary Principal**

03/93 – 12/2001

Department was dissolved 12/01 by the Chief Executive Officer (CEO) – staff was reassigned to various departments on campus. Served as personal secretary/assistant to the Director of Program Resource and Evaluation Supports (PRES). Supervised 5 Clerical Workers: maintained Director's schedule, prepared documentations for Director's signature, scheduled appointments for/with the Director, handled confidential material. Maintained personnel and budget records for the division (15); served as liaison between PRES and other campus offices such as Human Resources, CEO's office, Business Office, etc. Also worked closely with the Director of Activity Therapy in ordering all recreation supplies for the campus (approximately 700 clients); completed monthly and yearly reports for the recreation department and attended monthly recreation meetings. Performed various Human Resource functions (scheduled, interviewed applicants, performance appraisals, personnel actions). Distributed and secured paychecks.

Volunteer

2001 – 2012

Taught children and adults basis computer skills, identification of the different parts of the computer and also basic troubleshooting techniques.

Technical Skills: Microsoft Office Suite (0365, Word, Excel, Access, PowerPoint), Windows XP, Crystal Reports, SQL, Oracle, GroupWise, Working with various databases, (Continuous Computer Training – several computer books)

Education

Computer classes at Augusta Technical School	1996-1997
Computer classes taught at Gracewood via Staff Development (Atlanta)	2004 – 2007
Security Training/Computer Training – ECRH	2008-present



RICHMOND COUNTY SHERIFF'S OFFICE

Sheriff Richard Roundtree

Law Enforcement Center

400 Walton Way

Augusta, GA 30901

Phone: 706.821.1000 Fax: 706.821.1064

CRIMINAL AND DRIVER HISTORY WAIVER

In the event my application is selected as a potential candidate for employment with the Richmond County Sheriff's Office, I hereby give my consent for full and complete disclosure of my driver's history and criminal history.

I understand that any information obtained from the criminal and driver's histories, upon this release authorization, will be considered in determining my suitability for employment.

I authorize the disclosure of the aforementioned information to any person(s) deemed by the Richmond County Sheriff's Office to be a participant in the determination process of my employment suitability.

- Have you ever been arrested for ANY criminal or traffic charge? If so, explain:

NO

- In what states have you possessed a Driver's License in the past 10 years?

State: GA From: _____ To: Current
 State: _____ From: _____ To: _____
 State: _____ From: _____ To: _____

- Have you ever served in the Military/Reserves? Yes No

Branch: _____ From: _____ To: _____
 If yes, did you have a Military Driver's License? Yes _____ No
 Years: From: _____ To: _____

This candidate application authorization is valid for 180 days from date of signature.

I, Brenda Mills, give consent to the above-named entity to perform periodic criminal history background checks for the duration of my employment.

[Signature]
SIGNATURE OF APPLICANT

NOTARY PUBLIC

Brenda Mills
PRINTED NAME OF APPLICANT

COMMISSION EXPIRES Oct. 24, 2022 DATE

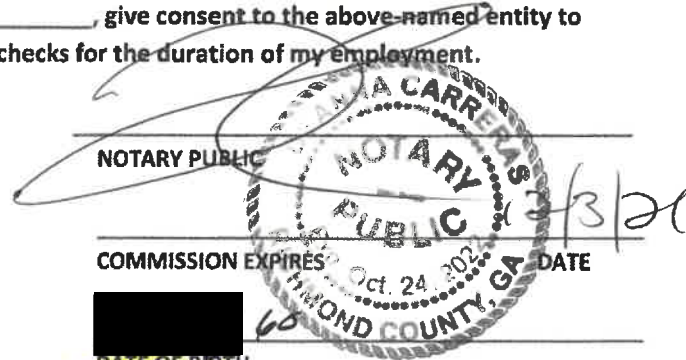
[Redacted]
SOCIAL SECURITY NUMBER

[Redacted]
DATE OF BIRTH

D RACE F SEX 5'5 HEIGHT 150 WEIGHT

Brenda Mills, Brenda Mills
LIST ALL NAMES (MAIDEN/MARRIED/ALIASES) USED BY APPLICANT

12/16/1
DATE



Richmond County Sheriff's Office
Applicant
Drug Use Statement

Principal Purpose: This form requests information about personal history of use, trafficking, or other activities involving illegal drugs and drug paraphernalia. Its purpose is to determine suitability for employment with the Richmond County Sheriff's Office as part of applicant screening process, and to eliminate non-qualified candidates.

Name: Brenda Martin SSN: [REDACTED] Date of Birth: [REDACTED] 66

As an applicant for employment with the Richmond County Sheriff's Office any prior drug use, attempted use, and/or experimentation must be disclosed before you can be considered for further processing.

Prior use, possession, and/or distribution of any of the following will be found to be an automatic disqualifier for employment with the Richmond County Sheriff's Office to include "Crack" Cocaine, Cocaine, Heroin/Opium or Derivatives, Methadone, LSD, and PCP. Controlled substances identified under Georgia Code 16-13-25, Schedule I through V, when used, possessed, and/or distributed without a legitimate medical reason and non-prescribed will be reviewed during the hiring process for possible candidate disqualification. "Use" is defined as trying, testing, experimenting, which includes but is not limited to, tasting, smoking, injecting, absorbing, sniffing, or inhaling a controlled substance enumerated in Schedules I through V. "Possession" is defined as unlawfully having actual physical control of a controlled substance enumerated in Schedules I through V drug for personal use or otherwise. "Distribution" is defined as unlawfully selling, furnishing, giving away, or delivering a controlled substance enumerated in Schedules I through V.

Do not include instances in which substances were prescribed, administered, or dispensed by a duly licensed physician for treatment of a legitimate medical condition. Please read the following instructions very carefully before answering the drug questions and initial your acknowledgment:


Initials

I understand that I must provide truthful information to The Richmond County Sheriff's Office regarding all drug use, attempted use, and/or experimentation of any illegal narcotics or dangerous drugs which have not been prescribed by a duly licensed physician, **other than marijuana usage**, regardless of my age or circumstances at the time of use, attempted use, and/or experimentation. I understand that I will be questioned and polygraphed regarding the information I provide. I understand that any omissions or inaccuracies between the information I provide and what is later learned during my background investigation may preclude me from further consideration for employment.

Name: Brenda Mann

SSN: [REDACTED]

Date of Birth [REDACTED]

60

BM
Initials

I understand that my responses to the drug questions are to be used to determine eligibility and suitability for employment. I also understand that my answers will not be used in any criminal proceedings against me, and that any declination to respond to the drug questions will be noted in my application record.

BM
Initials

By the words "use", "attempted use", and "experimentation" I understand that I am being asked to disclose any and all experiences with illegal narcotics or dangerous drugs, to include any act or attempted act of trying, smoking, ingesting, tasting, inhaling, injecting, puffing or otherwise experimenting with a controlled substance or a substance that I believe to be a controlled substance, **other than marijuana.**

BM
Initials

By the word "occasion" I understand that I am being asked to disclose each occasion or event in which I used, attempted to use, or experimented with illegal narcotics or dangerous drugs, **other than marijuana.**

BM
Initials

I understand that if I answer "Yes" to any of the following drug questions, I must attach a fully comprehensive statement that is legible, signed and dated.

Question #1

Have you ever used, tried, tasted, or experimented with any illegal narcotics or dangerous drugs, **other than marijuana** under any circumstances? (Please check)

YES () NO () If you answered yes to question #1, attach a comprehensive statement fully describing each occasion of drug use, attempted use, and/or experimentation covering each of questions A-H listed below. Your attached statement must be legible, signed and dated.

- A. What was/were the drug (s)?
- B. On how many occasions? NOTE: If you cannot be specific as to the exact number of occasions, answer the following: on at least _____ occasions, but not more than _____.
- C. Date first used/tried/experimented
- D. Date last used/tried/ experimented
- E. How was it obtained?
- F. Where was it used/tried/experimented?
- G. In what setting?
- H. Reason for use/try/experimentation

Question #2

Have you ever purchased, furnished, provided, sold, supplied, manufactured, produced, transported, or otherwise trafficked in any illegal narcotic or dangerous drug, **TO INCLUDE MARIJUANA**? (Please check) YES () NO () If yes, what was the amount and cost of the drug?

Question #3

Have you ever abused or sold any licit (legal) drugs, chemicals, paraphernalia, or addictive substances, not to include alcohol? (Please check) YES () NO (✓)

Question #4

Do you foresee any conflict of interest between your personal habits and beliefs and Sheriff's Office's mission to provide a drug-free environment? (Please check) YES () NO (✓)

IF YOU ANSWERED YES TO QUESTIONS #2 - #4, ATTACH A COMPREHENSIVE STATEMENT FULLY DESCRIBING ALL CIRCUMSTANCES AND DATES. YOUR ATTACHED STATEMENT MUST BE LEGIBLE, SIGNED, AND DATED.

I have been fully truthful in my answers and statements to the above questions and have disclosed all drug use, attempted use, and/or experimentation during my lifetime.


Applicant Signature


Date


Witness


Date

STATEMENT



RICHMOND COUNTY SHERIFF'S OFFICE

Sheriff Richard Roundtree

Law Enforcement Center

400 Walton Way

Augusta, GA 30901

Phone: 706.821.1000 Fax: 706.821.1064

BACKGROUND CHECK

DATE: January 6, 2022

Applicant: Brenda Maith

Position: Records

EMPLOYERS:

Georgia East Central Regional Hospital (1984 – 12/2021) – Sgt. McCarty spoke to Kimberly McCumbers-Ball who verified Maith's employment dates. Johnson stated that Maith retired in good standing with over 35 years of service to the hospital. She is eligible for re-hire.

REFERENCES:

Denise Epps (R.C.S.O.) – Sgt. McCarty made contact with Epps who stated that she has known Maith most of her life. She stated that while she has not seen Maith for several years, she knows Maith to be a good person, a hard worker, a good family person and has no character or integrity issues. She has never known her to associate with persons of questionable character.

█ **Evans** – Sgt. McCarty made contact with Evans who stated that she has known Maith for 40+ years and went to H.S. and college together. She described Maith as Humble, sweet, hardworking and punctual. She stated that she could not think of a negative thing she could say about her. She stated that Maith has the background and work ethic to do a great job for us.

█ **Middleton** – Sgt. McCarty spoke to Middleton who stated that she has known Maith for 10+ years and is a family friend. She described Maith as a sweet caring individual who would give you the shirt off her back, from a good upbringing, trustworthy, loyal and dependable. She stated that Maith is an overall good individual and would be a perfect candidate for a job with our agency.



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NOTES:

Sgt. McCarty conducted a social media search and located an account in the applicant's name. There was no inappropriate content noted.

Sgt. McCarty conducted a TLO and Internet search of the applicant and found no derogatory information.

Georgia P.O.S.T. – No record

PT SCORES – N/A

50 Round Firearm Qualification – N/A

Submitted by:

Sgt. William McCarty

Internal Affairs – Public Information Office

Office of Professional Standards & Training

Richmond County Sheriff's Office

FOR LAW ENFORCEMENT PURPOSES ONLY

BRENDA MAITH-People-Search-202201061549

2 Results Found for people named BRENDA MAITH who have used SSN: XXXXX in the United States.

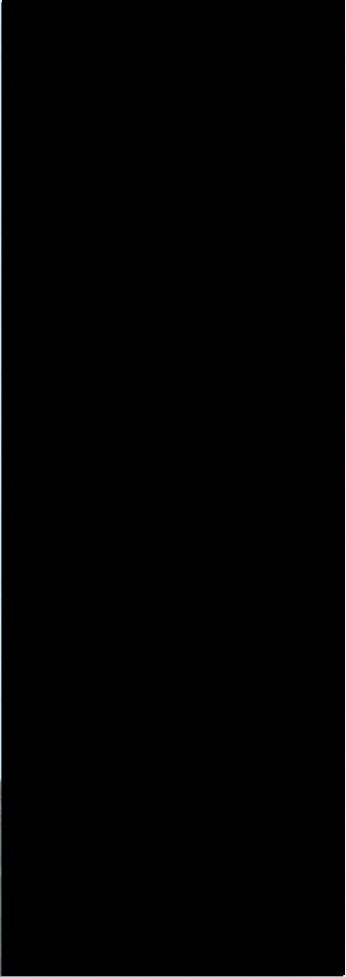
NAME	ADDRESS	FIRST SEEN	LAST SEEN	SSN	DOB
BRENDA MILLS MAITH	[REDACTED]	04/1987	01/06/2022	[REDACTED]	XX/XX/1960
Subject 1 of 2:					
<u>BRENDA MILLS MAITH (10/01/1988 to 11/03/2021)</u>					
<u>BRENDA G MILLS (04/01/1987 to 01/23/2003)</u>					
<u>BRENDA G MAITH (10/01/1988 to 01/26/1995)</u>					
SSN: [REDACTED]					
Issued: GEORGIA 1972					
[REDACTED]					
<u>Date of Birth</u>					
DOB: XX/XX/1960					
Age: 61					
Gender: Female					
Driver's License Detail:					
DL#: XXXX-XXX-XX-XXX-X					
DL State: GA					
Reported Date: [REDACTED] 2009					
[REDACTED]					
[REDACTED]					
<u>Possible Email Addresses</u>					
[REDACTED]					

3

3



Address History (4)



BRENDA M MAITH



06/07/1996



01/06/2022

Application Process I

Last Name	First Name	Middle Name	Suf
Maith	Brenda	M	
SS#	DL#	DOB:	
██████████	GA ██████████	██████████ 960	
New World:	See printouts		
Historical			
MNI:			
NCIC/GCIC/III	No Record		
Driver History	Ga Lic Valid		

Print Date/Time: 12/13/2021 11:00:31 AM

Activity Date/Time Global Subject Number	Activity Type Sealed	Activity Reference	ORI/FDID	Description	Name
01/22/2002 17:35:00 379126	Accident	2014045	GA1210000	Accident Type: 3 Rear End - Subject	Maith, Brenda
02/19/2012 13:30:00 379126	Accident	120032307	GA1210000	Accident Type: 1 Angle Intersecting - Subject	Maith, Brenda
07/24/2007 16:51:00 379126	Accident	70146780	GA1210000	Accident Type: 1 Angle Intersecting - Subject	Maith, Brenda
01/22/2002 17:35:00 379126	Accident	2014045	GA1210000	Accident Type: 3 Rear End - Vehicle Owner	Maith, Brenda
07/24/2007 16:51:00 379126	Accident	70146780	GA1210000	Accident Type: 1 Angle Intersecting - Vehicle Owner	Maith, Brenda

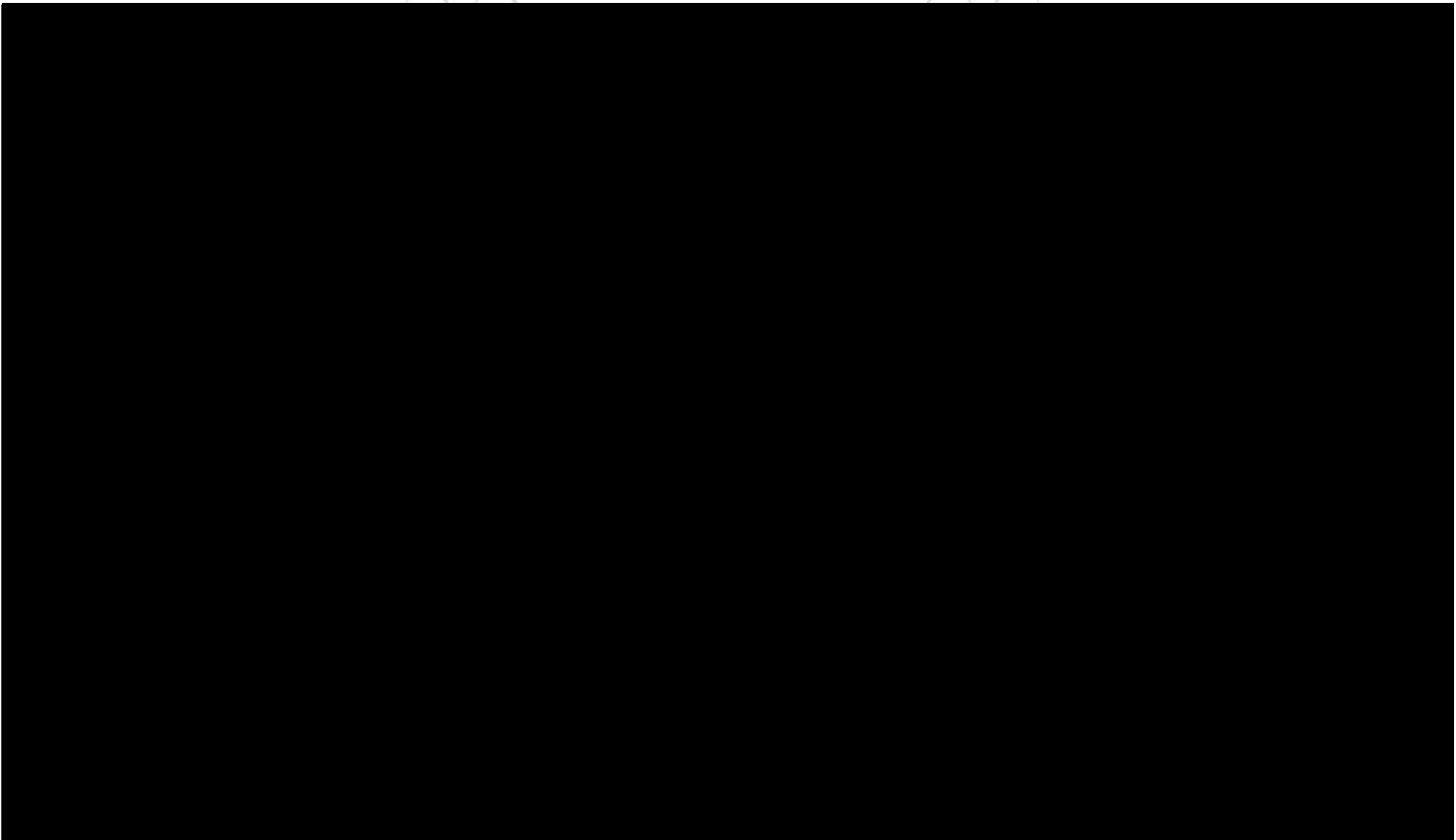
Total Rows: 5

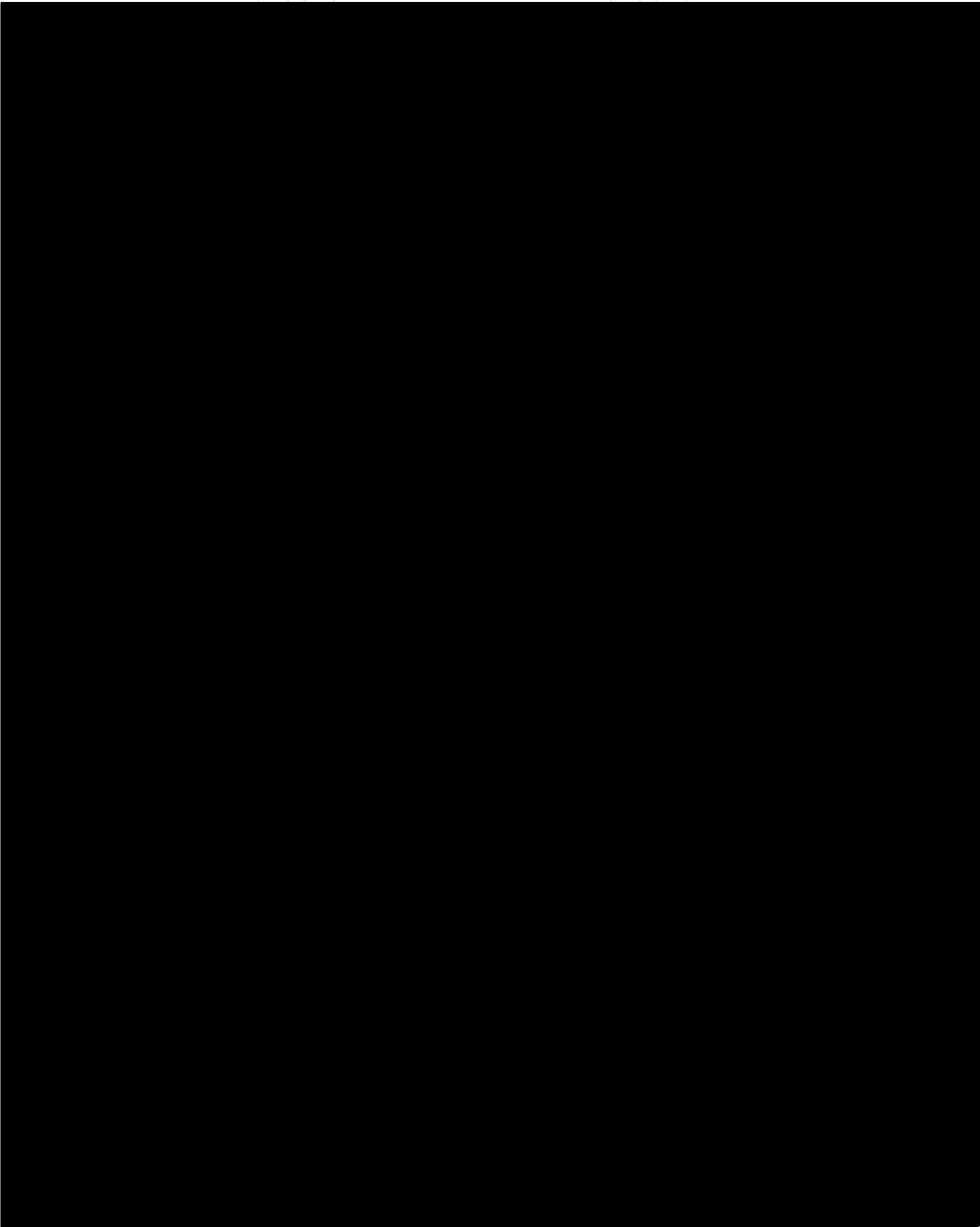
Print Date/Time: 12/13/2021 11:00:47 AM

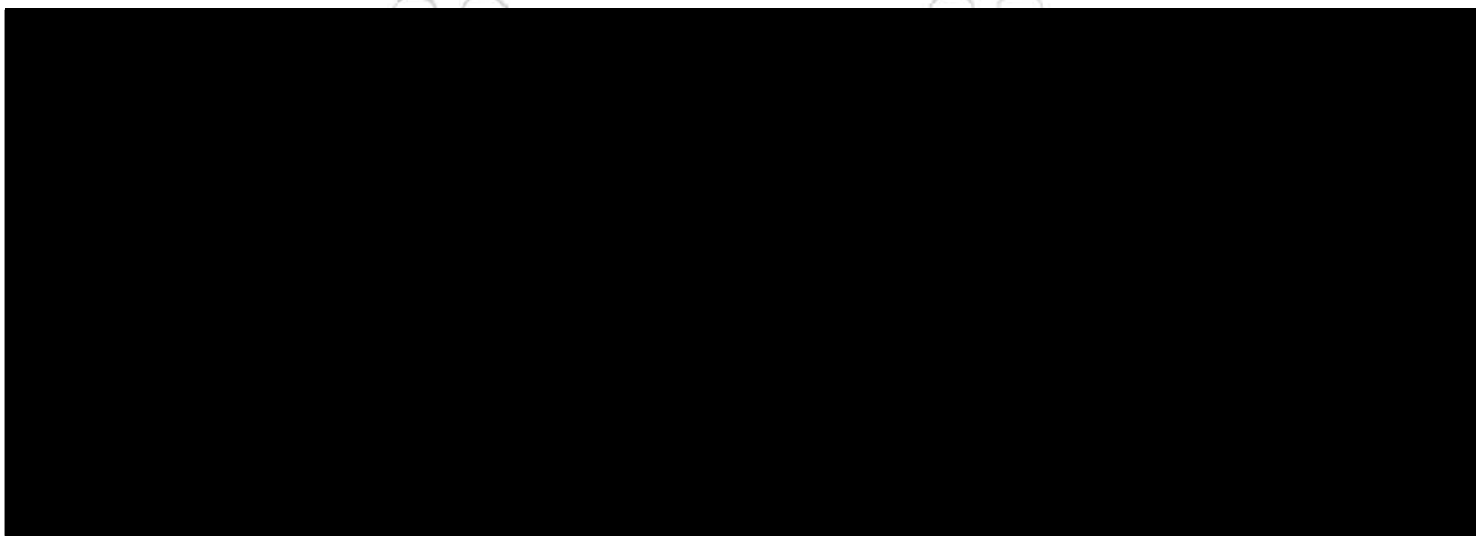
Activity Date/Time	Activity Type	Activity Reference	ORI/FDID	Description
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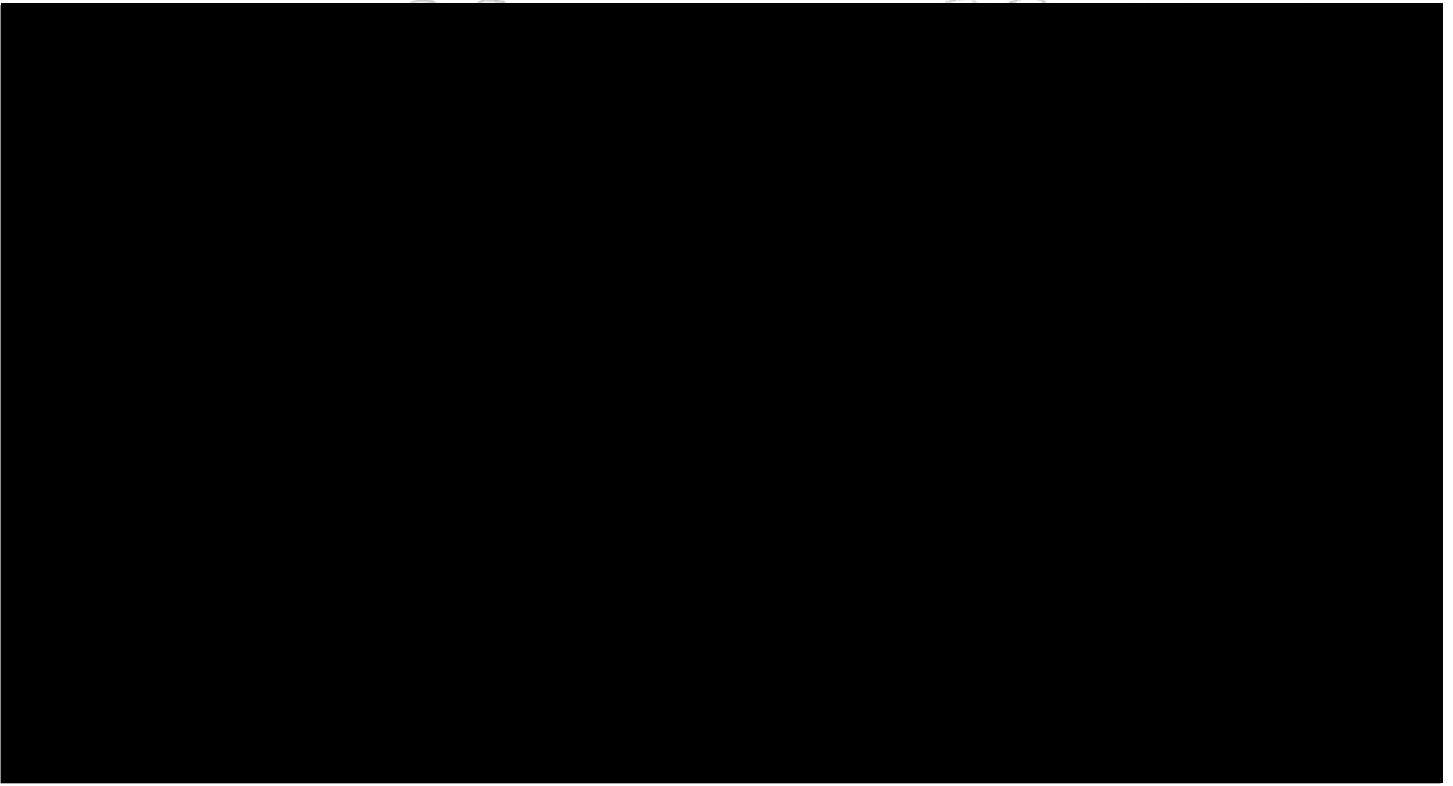
Name	Global Subject Number	Scaled		
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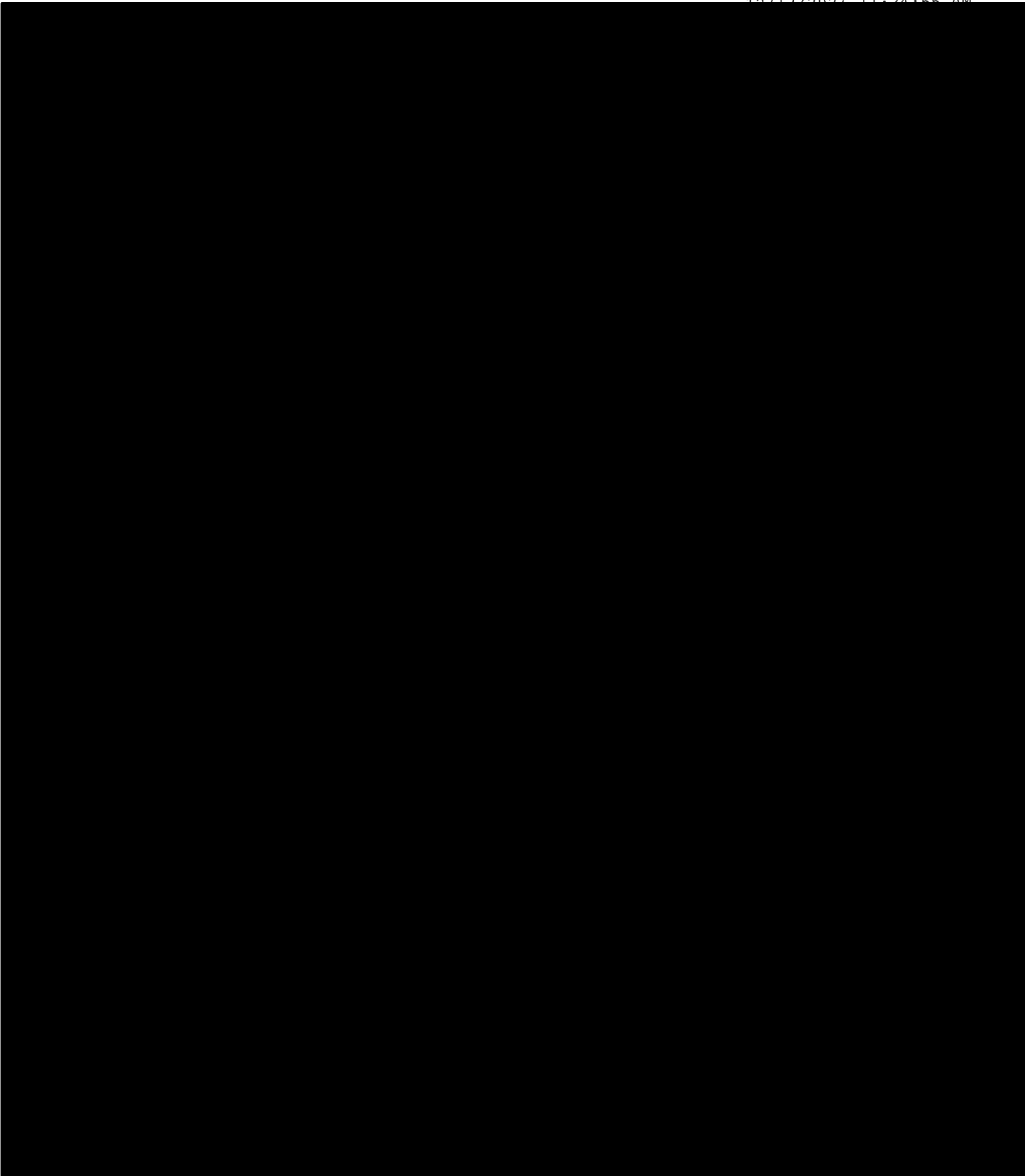




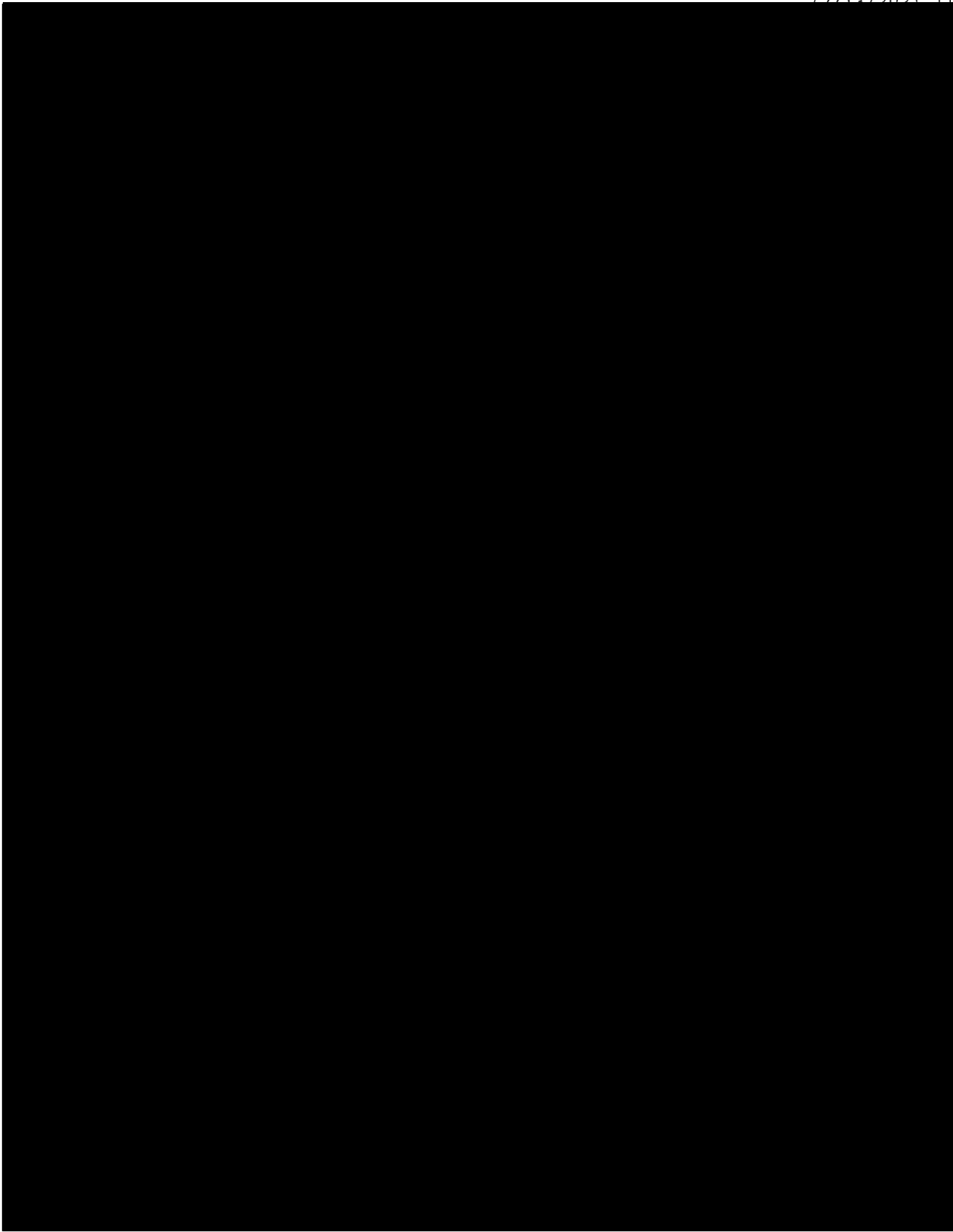




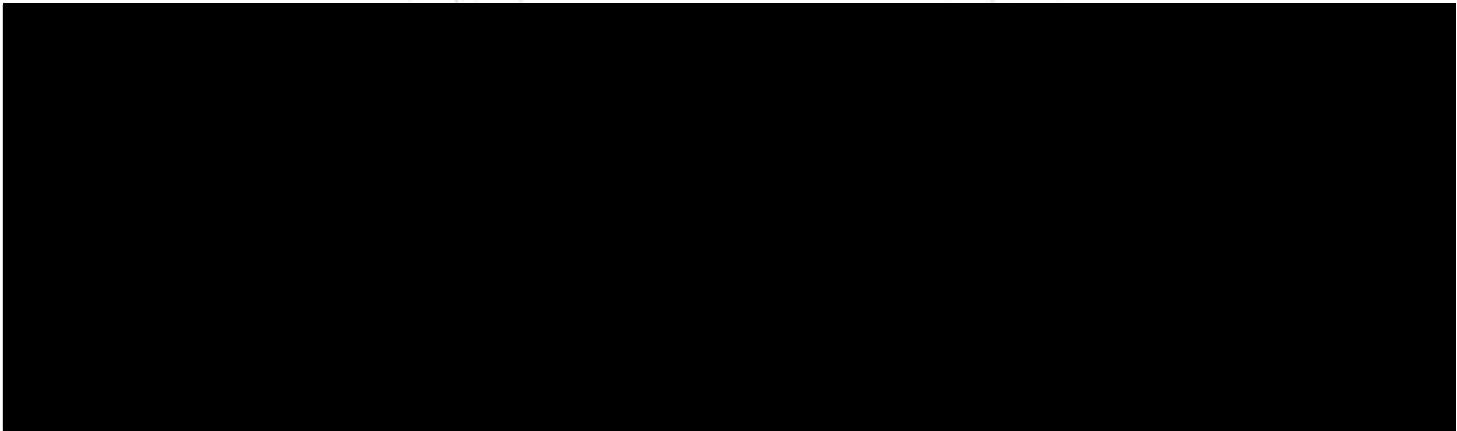


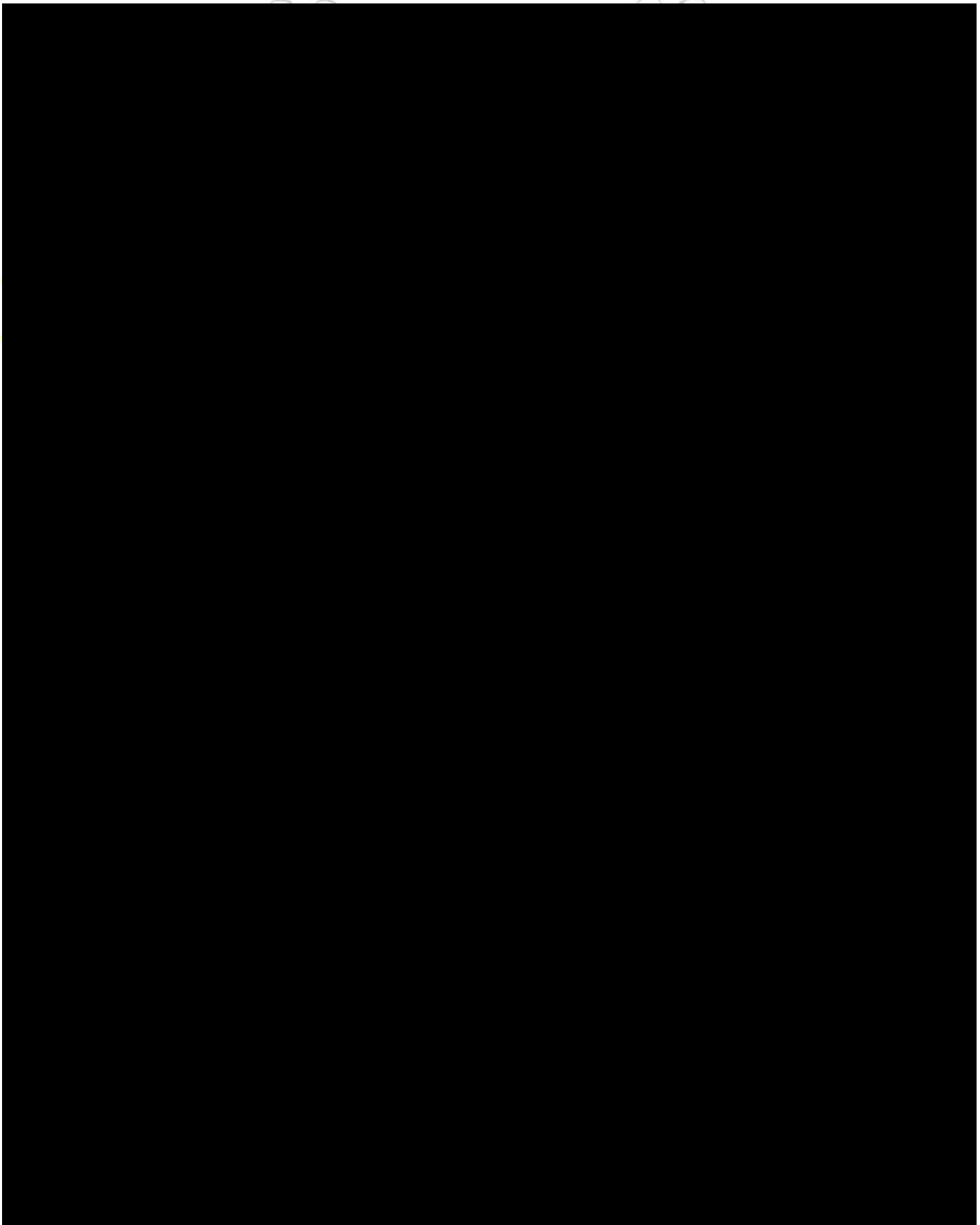


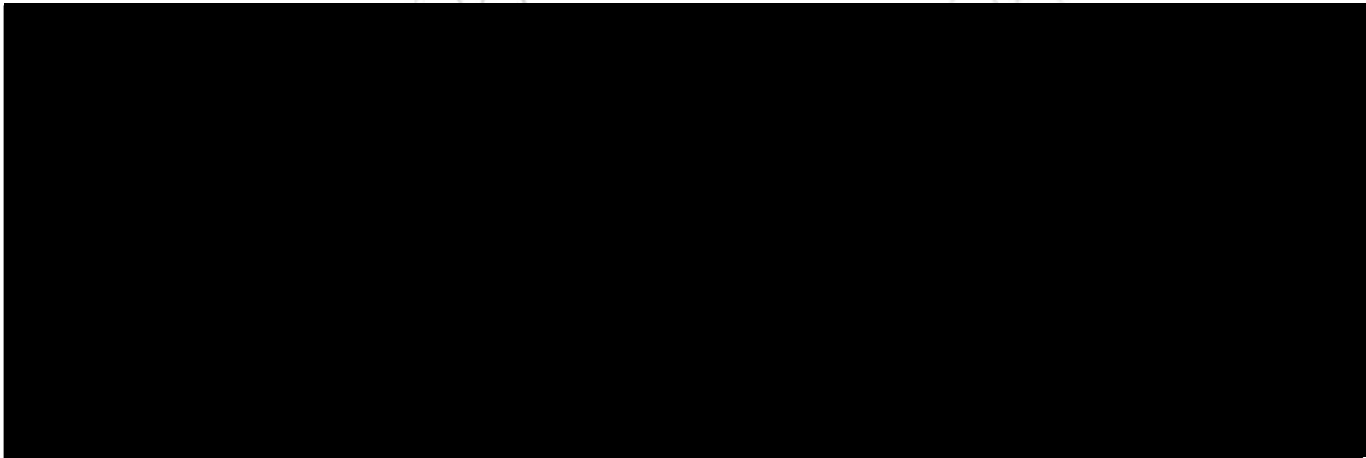












11/11

11/11

