BEFORE THE CITY OF SEATTLE PUBLIC SAFETY CIVIL SERVICE COMMISSION

In the matter of the appeal of

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RONALD WILLIS

Appellant

V.

DISMISSAL ORDER PSCSC no. 24-01-006A

SEATTLE POLICE DEPARTMENT

Respondent

On October 1, 2024, the Appellant filed a timely appeal with the Public Safety Civil Service Commission (PSCSC) of a 90-hour disciplinary suspension issued to him by Seattle Police Department (SPD). The first prehearing conference was held on December 5, 2024.

Officer Willis represented himself, the department was represented by Catherine Seelig, Assistant City Attorney.

On January 30, 2025, Assistant City Attorney Catherine Seelig, emailed the PSCSC to notify that Officer Willis and the department entered into a Settlement Agreement. On February 3, 2025, PSCSC received Officer Willis' signed Voluntary Request to Withdraw Appeal form and a copy of the amended Disciplinary Action Report indicating his suspension was reduced to 45-hours. PSCSC Rule 6.07 provides that an appellant may withdraw their appeal prior to hearing.

ORDER

Upon reviewing the terms of the settlement agreement and having considered the Appellant's request to withdraw their appeal, I hereby order that the Appellant's appeal is **dismissed**.

Dated this 4th day of February 2025

FOR THE CITY OF SEATTLE PUBLIC SAFETY CIVIL SERVICE COMMISSION

Andrea Scheele, Executive Director

Willis v. SPD PSCSC# 24-01-006A Dismissal Order - 1 City of Seattle Public Safety Civil Service Commission PO Box 94729, Seattle, WA 98124-4729 (206) 233-7118

1 2	BEFORE THE CITY OF SEATTLE PUBLIC SAFETY CIVIL SERVICE COMMISSION				
3	In the matter of the appeal of				
4	RONALD WILLIS				
5	Appellant	DEC	LARATION OF SERVICE		
6	V.	PSCSC no. 24-01-006A			
7	SEATTLE POLICE DEPARTMENT				
8	Respondent				
9	I, Teresa Jacobs, declare under penalty of perjury under the laws of the State of Washington, that on				
10	the date below, I caused to be served upon the below-listed parties, via email, a true and correct				
11	copy of the foregoing document: Dismissal Order.				
12					
13	Party		Method of Service		
14	Appellant: Ofc. Ronald Willis		⊠E-Mail		
14 15	Appellant: Ofc. Ronald Willis		⊠E-Mail		
	Appellant: Ofc. Ronald Willis Respondent: on behalf of the Seattle Police Department	nent,	⊠E-Mail ⊠E-Mail		
15	Respondent: <i>on behalf of the Seattle Police Departm</i> c/o Catherine Seelig, Assistant City Attorney, Law	nent,			
15 16	Respondent: <i>on behalf of the Seattle Police Departm</i> c/o Catherine Seelig, Assistant City Attorney, Law <u>Catherine.Seelig@seattle.gov</u> Kim Fabel, Legal Assistant, Law	nent,			
15 16 17	Respondent: <i>on behalf of the Seattle Police Departri</i> c/o Catherine Seelig, Assistant City Attorney, Law <u>Catherine.Seelig@seattle.gov</u>	nent,			
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15 16 17 18 19	Respondent: <i>on behalf of the Seattle Police Departm</i> c/o Catherine Seelig, Assistant City Attorney, Law <u>Catherine.Seelig@seattle.gov</u> Kim Fabel, Legal Assistant, Law <u>Kim.Fabel@seattle.gov</u>	nent,			
15 16 17 18 19 20	Respondent: <i>on behalf of the Seattle Police Departm</i> c/o Catherine Seelig, Assistant City Attorney, Law <u>Catherine.Seelig@seattle.gov</u> Kim Fabel, Legal Assistant, Law <u>Kim.Fabel@seattle.gov</u> Cc: Kimberly Loving, Director, SHR <u>Kimberly.loving@seattle.gov</u>	nent,			
15 16 17 18 19 20 21	Respondent: <i>on behalf of the Seattle Police Departri</i> c/o Catherine Seelig, Assistant City Attorney, Law <u>Catherine.Seelig@seattle.gov</u> Kim Fabel, Legal Assistant, Law <u>Kim.Fabel@seattle.gov</u> Cc: Kimberly Loving, Director, SHR				

Teresa R. Jacobs, Executive Assistant Civil Service Commissions

Willis v. SPD PSCSC# 24-01-006A Dismissal Order - 2



APPEAL NO. PSCSC No. 24-01-006A

October 1, 2024

NOTICE OF APPEAL TO THE PUBLIC SAFETY CIVIL SERVICE COMMISSION

The appeal must be received by the Executive Director within 10 (ten) days, following the received date or the postmarked date of the final notice from the department to the appellant.

INSTRUCTIONS: Complete all the pages, sign and attach any documents or correspondence that you have received from the Department related to your appeal. Send by postal or hand deliver to the Executive Director, Civil Service Commissions 700 5th Avenue, Suite 1670, PO Box 94729, Seattle, WA 98124-472 or email to Andrea.Scheele@seattle.gov or Teresa.Jacobs@seattle.gov

An original signature of the appellant or authorized representative is required for appeals.

Appellant's Full Name	e Work Address	Work Telephone
Ron M. Willis	10049 College Way N, Seattle, WA 98133	
Residence Address	City /State/Zip	Home Telephone/Email
Job Title/Position	Department/Unit	Immediate Supervisor
Police Officer	Seattle Police North Precinct	Tom McLaughlir
Start Date in Position 02/02/1995	City Employee Since, Month/Date/Year 02/02/1995	Employee ID #

II. ACTION BEING APPEALED: (check one)

t,

Suspension Discharge

□ Demotion

□ Violation of Article XVI of the Charter of the City of Seattle, PSCSC Ordinance or PSCSC Rules

(Please list the rule): _____

Other Personnel Related Issue: (Please briefly state the issue): _____ 90 hours per week work limit rule

If needed, you may provide the following information on an additional sheet of paper and attach any documents or correspondence that you have received from the Department related to your appeal.

Reason for this appeal (Please include dates, location and action): ______ Excessive suspension time for violating 90 hours per work limit, North Precinct

November 2023

Remedy Sought (What do you want?): _____

Reduction in suspension time amount

HI.	UNION:
	0111011.

WHAT IS THE NAME OF YOUR UNION ASSOCIATION OR GUILD?

SPOG

Local Number: _____

□I HAVE /☑ I HAVE NOT filed a grievance on the same issues that I identified in this appeal, with my union or bargaining unit.

IV. ATTORNEY/AUTHORIZED REPRESENTATIVE:

An Attorney or a representative is NOT required for the appeal process.

• Do you have an attorney or another person representing you for this appeal? If yes, please have your attorney submit a <u>NOTICE OF APPEARANCE</u> to the Commission Office and Department. All documents and information related to the appeal will go to the attorney or representative.

Name:	
Firm:	
Address:	
****	City of Seattle Civil Service Commissions
4 m. ov	Seattle Municipal Tower, 700 Fifth Avenue, Suite 1670 PO Box 94729 Seattle, WA 98124-4729 Tel (206) 233-7118, Fax: (206) 684-0755, http://www.seattle.gov/CivilServiceCommissions/
An et	ual employment opportunity employer. Accommodations for people with disabilities provided upon request



Email:	
Signature of Attorney/Representative: (If	filling out this form):
Jighacure of the the	Date
A. <u>APPELLANT</u> : If you <u>do not</u> have an attorney or a repres documents related to this appeal should Mailing Address:	sentative, please enter the address where All be sent:
Personal Email:	

Home/Cell Phone (Include Area Code):			
Ron M. Willis Appellant's NAME (please print)	RH N SIGNATURE OF AP	<u>PELLANT</u> DA	ATE

City of Seattle Civil Service Commissions

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Seattle Municipal Tower, 700 Fifth Avenue, Suite 1670 PO Box 94729 Seattle, WA 98124-4729 Tel (206) 233-7118, Fax: (206) 684-0755, http://www.seattle.gov/CivilServiceCommissions/ An equal employment opportunity employer. Accommodations for people with disabilities provided upon request