

 *Public Safety
Committee
Meeting*

Tompkins County Sheriff's Office Monthly Report – July 2024



Derek R. Osborne
Sheriff

Jennifer K. Olin
Undersheriff

STATISTICS

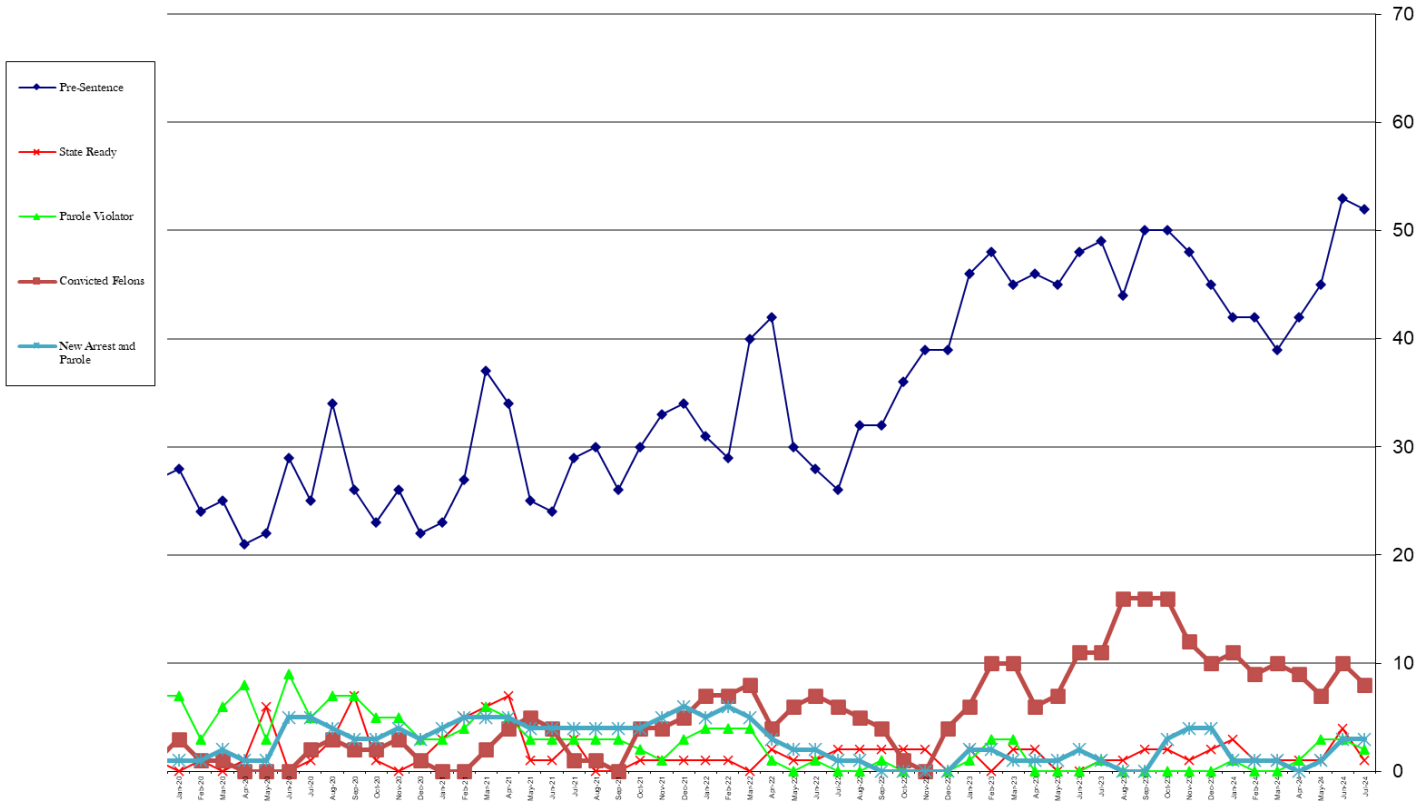
Road Patrol Division Statistics	
Total Incidents	1,604
Violation Arrests	8
Misdemeanor Arrests	32
Felony Arrests	17
Active Warrant Arrests	2
DWI Arrests	6
Felony DWI Arrests	3

Civil Division Statistics	
Total Revenue Received	\$41,835
Revenue Remitted to TC Treasurer	\$5,760
Civil Actions Docketed	146
Civil Papers Requiring Service	186
Civil Papers Exempt from Fees	77
Civil Paper Service Attempts	122
Successful Civil Paper Service	146

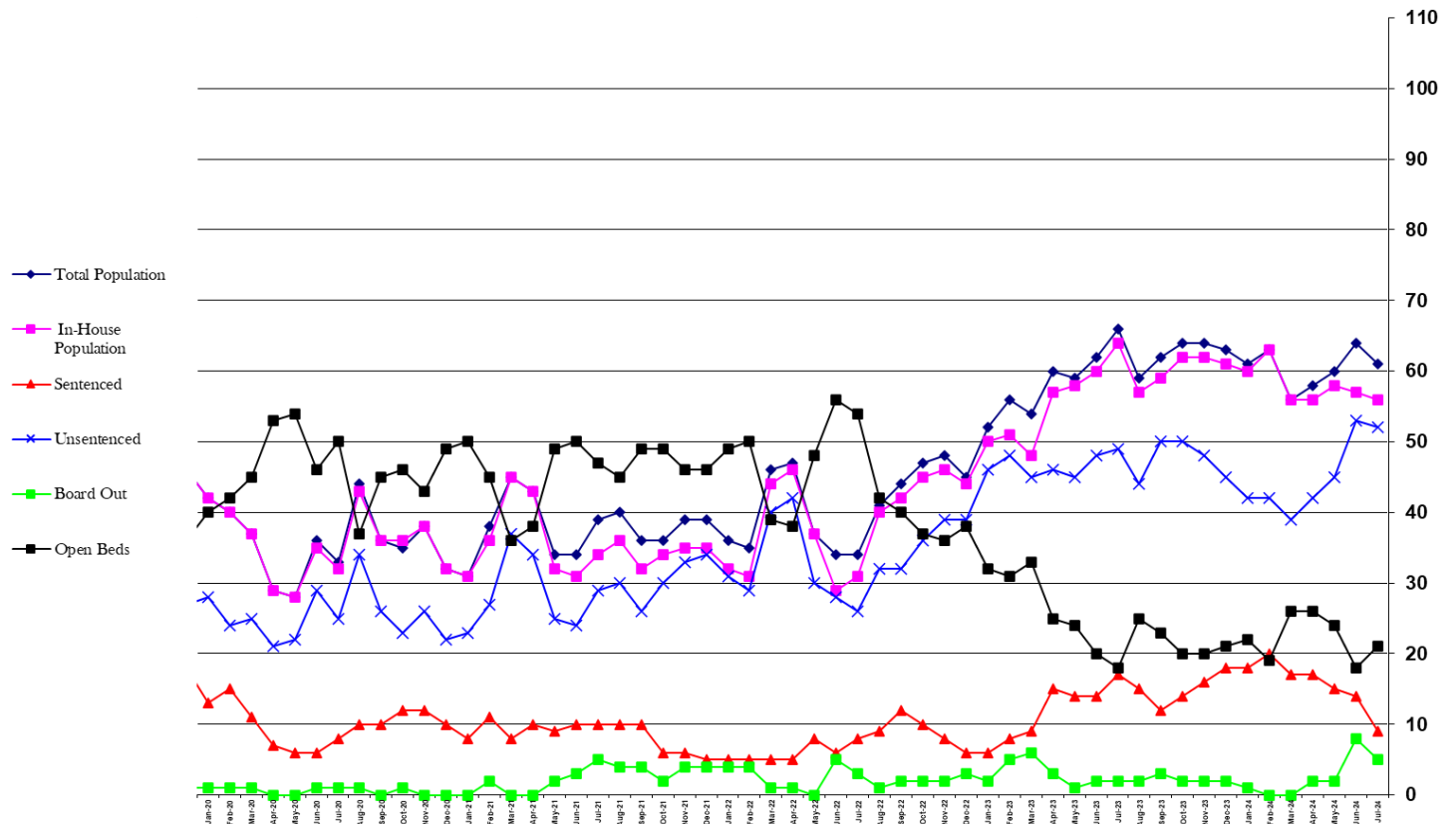
Corrections Division Statistics	
Total Intakes	77
Held for Felony Offenses	45
Held for Misdemeanor Offenses	29
Total Releases	67
Transports to State Prison	4
Transports to Rehab	3
Total Transports (Courts, Medical, etc.)	107
Inmate Board-out Days	167
Board-out Classification (High/Low)	3/4
Board Out Costs (exc. Mental Health)	\$10,560
Disciplinary Incidents	13
Bail Money Processed	\$20,250

CORRECTIONS DIVISION POPULATION

Unsented Inmate Breakdown (Averages)

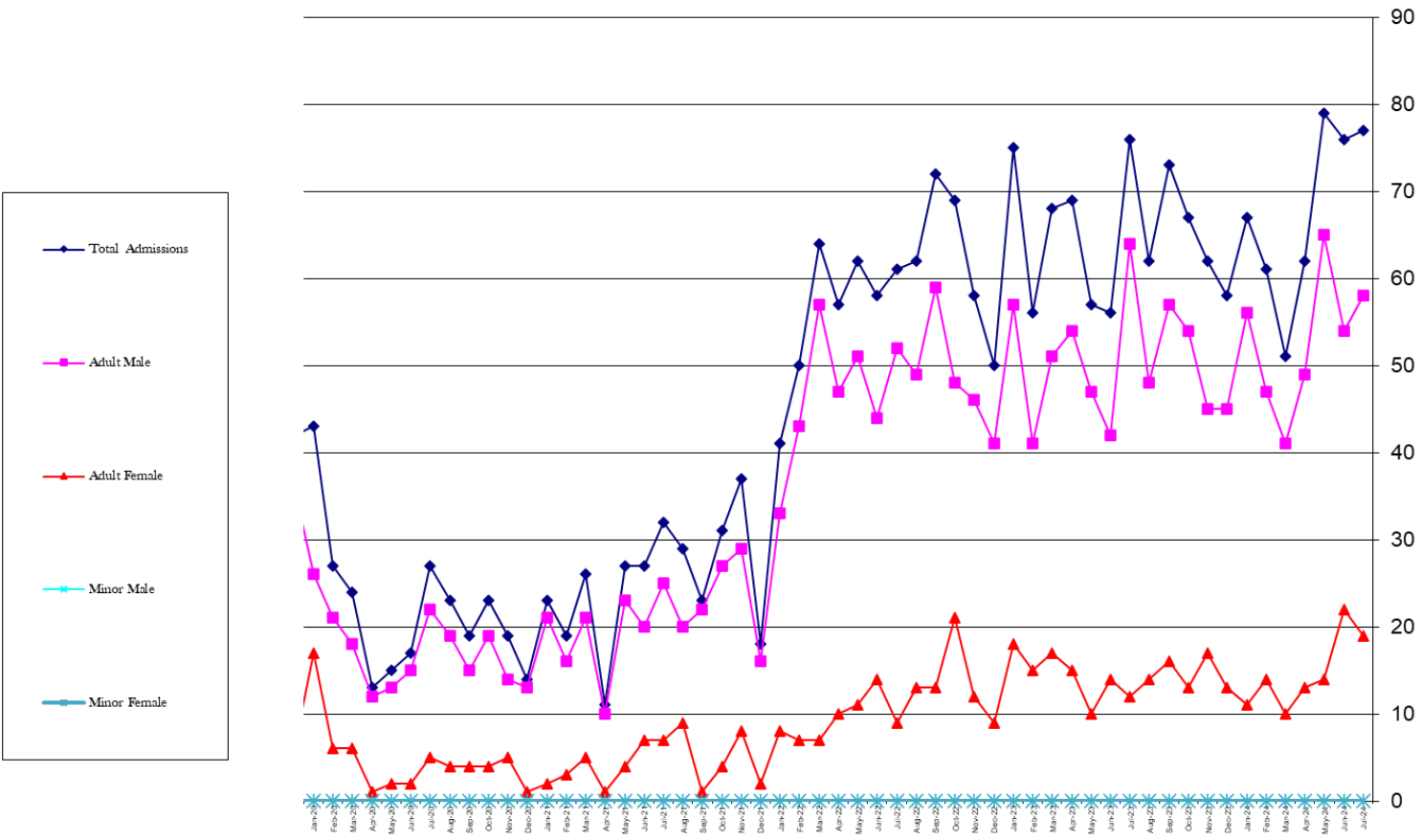


Average Jail Statistics



CORRECTIONS DIVISION POPULATION

Monthly Admission Totals



TRAINING

- **July 2, 2024:** The Capital Region Threat Assessment Team Conference. *AC-TACT*. 1 attendee
- **July 9, 2024:** Principled Policing In-Service Training for Probation, Parole, and Corrections Personnel. *DCJS*. 2 attendees
- **July 16-25, 2024:** Virtual Train the Trainer. *Cleaning Management Institute*. 1 attendee
- **July 23, 2024:** New York State Sheriff's Association 90th Annual Summer Conference. *NYSSA*. 2 attendees
- **July 23-25, 2024:** Street Gang Investigations. *Northeast Counterdrug Training Center*. 5 attendees
- **July 25, 2024:** New York Election Security Workshop & Tabletop Exercise. *NYS Board of Elections*. 1 attendee

ACTIVITIES

- **July 4, 2024:** The Sheriff's Office, municipal law enforcement agencies, and the STOP-DWI program across the county participated in the statewide July 4th High Visibility Engagement Campaign effort through July 7th.



- **July 7, 2024:** TCSO held our first annual Officer Wellness Symposium with help from the TCSO Deputy Sheriff's Association.



- **July 12, 2024:** Received a letter commending the TCSO CARE Team Deputy Barber and Clinician Rachel Webb. (see attached)

- **July 13, 2024:** TCSO helped escort the Vietnam Veterans Ride.



ACTIVITIES CONTINUED

- **July 25-28, 2024:** TCSO provided security for The Finger Lakes 32nd Annual Grassroots Festival of Music & Dance.



- **July 27, 2024:** The Sheriff's Office participated in the First Responder Charity Softball Tournament with Ithaca College Police, Cornell University Police, and the Ithaca Police Department. The day was filled with softball, raffles, family-friendly activities, and a lunch catered by Wings Over Ithaca all to benefit the American Foundation for Suicide Prevention.



- **July 16-18, 2024:** The Law Enforcement Agency Accreditation Program is voluntary and designed to improve an agency's effectiveness, efficiency, and professionalism; promote training and foster public confidence in Law Enforcement Agencies. Agencies must meet a set of standards in three categories: Administration, Training and Operations. Accreditation provides formal recognition that an agency meets or exceeds expectations of quality; demonstrates that the agency performs in a professional manner, has formalized policies in place to govern its operational practices and procedures, and that its employees contribute to the agency's mission and know what is expected of them.



TOMPKINS COUNTY SHERIFF'S OFFICE

COMPLAINT OR COMMENDATION FORM

This form must be delivered to the Tompkins County Sheriff's Office in one of the following ways:
Hand delivered or mailed: Tompkins County Sheriff's Office, 779 Warren Road, Ithaca, NY 14850,
or by Fax: (607) 266-5436.

Please complete as much information as possible below. The Sheriff's Office only accepts complaints and commendations for or against members of the Tompkins County Sheriff's Office. You may file this form anonymously, however, keep in mind that an anonymous complaint is extremely difficult to investigate.

I want to file a: Complaint Commendation Interested in Mediation? Yes No

What outcome are you seeking? (Please describe what happened on page 3)

Formal Complaint: Involves a serious allegation of misconduct, and I want my complaint officially investigated, for which discipline may be imposed if the allegation is sustained.

Informal Complaint: Involves a minor complaint or concern, and I only want my complaint/concern on record. I understand it will be for informational purposes only and will not be formally investigated. However, the matter will be discussed with the employee(s) involved.

Information about you:

First Name: Vincent Last: Luisi MI: _____

Preferred Pronoun(s): _____ Chosen Name: _____

Home Phone: (607) 233-0426 Cell: (____) _____

Best Time to Call? Any Email: vgluisi@gmail.com

Address: Econo Lodge Triphammer mall

CITY: Ithaca State: NY Zip Code: 14850

Information about the incident:

Date: 02/17/2024 Time: 10 ISH AM PM

Address/Location:

Address: TOPS Parking Lot

CITY: LANSING A State: NY Zip Code: 14850

Information about the Tompkins County Sheriff's Office employee(s) involved:

Name: Dep. BARBER ID#: _____

Name: And other depts that don't wish to be publicly recognized ID#: _____

TOMPKINS COUNTY SHERIFF'S OFFICE

COMPLAINT OR COMMENDATION FORM

Are you submitting this form for someone else? Yes No

Did you witness this incident? Yes No

Person you are submitting for: _____ Phone: (____) _____ - _____

Additional Witnesses:

First Name: _____ **Last:** _____ **MI:** _____

Address: _____

C/T/V: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ - _____ Cell: (____) _____ - _____

First Name: _____ **Last:** _____ **MI:** _____

Address: _____

C/T/V: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ - _____ Cell: (____) _____ - _____

First Name: _____ **Last:** _____ **MI:** _____

Address: _____

C/T/V: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ - _____ Cell: (____) _____ - _____

OPTIONAL INFORMATION: The Sheriff's Office is requesting this information for statistical purposes. It is optional to answer these demographic questions. We value your participation in helping us track any biases or trends within the Sheriff's Office.

Do you speak and understand English? Yes No

Sex/Gender Expressed: MALE

Sexual Orientation: STRAIGHT

Race: Caucasian

Ethnicity: AMERICAN

Do you have a Mental Illness? Yes No

Do you struggle with homelessness? Yes No

Were you homeless at the time of this incident? Yes No

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l. * Not now I don't.

TOMPKINS COUNTY SHERIFF'S OFFICE

COMPLAINT OR COMMENDATION FORM

6/27/04

Briefly summarize what happened (attach additional pages or documents if needed).

It is important to provide as much information as possible describing the incident, to include location, date, time, employee(s) involved, and witnesses.

Dear Sheriff Osborne, its funny to ask someone to be "brief" and the same time provide as "much info" AS possible. I'll do my best.

I'm A 62 y/o Army veteran that became homeless in Sept. of 2023. I was living in my POV parked at Tops parking lot; (the lot next to Cayuga motel) & the lot that encompasses, The Econo Lodge & Aldis.

Thats my background.

The person's I want to Recognize specifically are Deputy Barber & the social worker that rides in the black & white shop "CARE"

She knocked on my car window sometime in Feb asking if I was "OK" or needed anything. I replied I was "fine" I told her that I really needed help getting an "ID", because I didnt have an ID. I asked her if TOSD had a sheriff's ID? Dep Barber told me

If you wish to submit this form anonymously, please write/type "ANONYMOUS" on the signature line.

I acknowledge that the information provided in this statement is true and factual to the best of my knowledge and will become public record once filed.

I understand I may be required to appear for an interview or to provide other investigative assistance, as necessary.

I understand that if I file a complaint, it is unlawful and against Sheriff's Office policy for anyone to retaliate against me for filing this complaint.

Signature

Date

.....
OFFICIAL USE ONLY

Date Received: ____/____/____ Time Received: _____ Received by: _____

6/27/04

that as far as she knew they did.

Dep Barber could have told me to go on line and download the forms, but she didn't, she realized I wasn't in a position to do that.

A few days later she stopped by and knocked on my window and "GAVE" me the forms I needed to get A "Sheriff's ID"

She didn't have to do that, she went out of her way to go Above & Beyond to help me.

I also want to say you have two "other" deputies that have helped me; but they wished not to be recognized; I respect their wishes. However, they ~~know~~ know who ~~their~~ they ARE.

But please officially recognize Dep BARBER

Thank you
Vincent Luni