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**BEFORE THE CITY OF SEATTLE  
PUBLIC SAFETY CIVIL SERVICE COMMISSION**

In the matter of the appeal of

**RONALD WILLIS**

Appellant

V.

**SEATTLE POLICE DEPARTMENT**

Respondent

**DISMISSAL ORDER**

**PSCSC no. 23-01-004A**

On November 13, 2023, the Appellant filed a timely appeal with the Public Safety Civil Service Commission (PSCSC) of a 36-hour disciplinary suspension issued to him by Seattle Police Department (SPD). The first prehearing conference was held on February 2, 2023.

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

On May 28, 2024, the Appellant emailed the PSCSC to notify that he and the department entered into a Settlement Agreement, and he requested to withdraw his appeal. PSCSC Rule 6.07 provides that an appellant may withdraw their appeal prior to hearing. Officer Willis submitted a signed Voluntary Request to Withdraw Appeal form and a copy of the amended Disciplinary Action Report indicating Officer Willis' suspension was reduced to 27-hours.

**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 17<sup>th</sup> day of June 2024,

FOR THE CITY OF SEATTLE PUBLIC SAFETY CIVIL SERVICE COMMISSION

  
Andrea Scheele, Executive Director

1  
2 **BEFORE THE CITY OF SEATTLE**  
3 **PUBLIC SAFETY CIVIL SERVICE COMMISSION**

4 In the matter of the appeal of

5 **RONALD WILLIS**

6 Appellant

7 V.

8 **SEATTLE POLICE DEPARTMENT**

9 Respondent

**DECLARATION OF SERVICE**

**PSCSC no. 23-01-004A**

10 I, Teresa Jacobs, declare under penalty of perjury under the laws of the State of Washington,  
11 that on the date below, I caused to be served upon the below-listed parties, via email, a true and  
12 correct copy of the foregoing document: **Dismissal Order**.

13

Party	Method of Service
14 Appellant: Ofc. Ronald Willis 15 [REDACTED] 16 17	<input checked="" type="checkbox"/> E-Mail
18 Respondent: <i>on behalf of the Seattle Police Department,</i> 19 <a href="mailto:Catherine.Seelig@seattle.gov">Catherine.Seelig@seattle.gov</a> 20 <a href="mailto:Bibi.Shairulla@seattle.gov">Bibi.Shairulla@seattle.gov</a> 21 Cc: Kimberly Loving, Interim Director, SDHR 22 <a href="mailto:Kimberly.loving@seattle.gov">Kimberly.loving@seattle.gov</a>	<input checked="" type="checkbox"/> E-Mail

23 DATED: June 17, 2024, at Seattle, Washington.

Teresa R. Jacobs  
Teresa R. Jacobs, Executive Assistant  
Civil Service Commission

**APPEAL TO THE CIVIL SERVICE COMMISSION (DISCIPLINARY)**

<b>Appeal No.</b>	<u>PSCSC # 23-01-004A</u>
<b>Date Filed</b>	<u>November 13, 2023</u>

<b>Full Name of Appellant</b>	Ron Morgan Willis	<b>Work Address</b>	10049 College Way N Seattle, WA 98133
<b>Residence Address</b>	[REDACTED]	<b>Work Telephone</b>	
<b>City</b>	<b>State</b>	<b>Zip</b>	
	[REDACTED]		
<b>Home/Cell Phone:</b>	[REDACTED]	<b>Employee ID</b>	[REDACTED]
		<b>Department</b>	Seattle Police Dept
<b>Email:</b>	[REDACTED]	<b>Job Title</b>	Police Officer

<b>1. <u>WHAT ACTION IS BEING APPEALED?</u></b> <b>(CHECK ONE)</b>	<input type="checkbox"/> <b>Demotion (5.01A)</b>
	<input checked="" type="checkbox"/> <b>Suspension</b> <input type="checkbox"/> <b>Probation</b> <input type="checkbox"/> <b>Discharge (5.01B)</b>
	<input type="checkbox"/> <b>City of Seattle Personnel Ordinance or Rule(s) Violation (5.01C):</b>

**What Personnel rule, regulation, or provision, do you believe was violated?** \_\_\_\_\_

Reason for this appeal <u>Length of suspension</u> is excessive _____ _____ _____	Remedy Sought (What do you want?): <u>Shorter suspension</u> _____ _____
<b>2. UNION:</b>  If you are a member of a union, what is the name of your union? <u>Seattle Police Officers Guild</u>  Local Number: _____	<input type="checkbox"/> I HAVE <input checked="" type="checkbox"/> I HAVE NOT  filed a grievance on the same issues that I identified in this appeal, with my union or bargaining unit.  This matter <input type="checkbox"/> IS <input type="checkbox"/> IS NOT the subject of arbitration pursuant to a collective bargaining agreement.
<b>3. EMPLOYEE GRIEVANCE PROCEDURE:</b> Did you receive notification of your right to a timely resolution of this grievance from your Department?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (SMC 4.04.070)	If you filed a grievance through the Employee Grievance Procedure, what was the outcome? _____ _____ _____ _____
<input type="checkbox"/> I HAVE <input checked="" type="checkbox"/> I HAVE NOT filed a grievance on the issues that are identified in this appeal, through the Employee Grievance Procedure. (Personnel Rule 1.4.2)	

**Please include with your appeal form the Step 3 Grievance decision of your employing department and Investigatory Report from SDHR, and any documents or correspondence that you have received from the Department related to your appeal. To meet timely filing of your appeal, these documents can be sent after filing this document.**

**4. 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?  YES  NO

If yes, please have your attorney submit a NOTICE OF APPEARANCE to the Commission Office and the Department.

**All documents and information related to the appeal will go to the attorney or representative.**

Name: \_\_\_\_\_ Firm: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

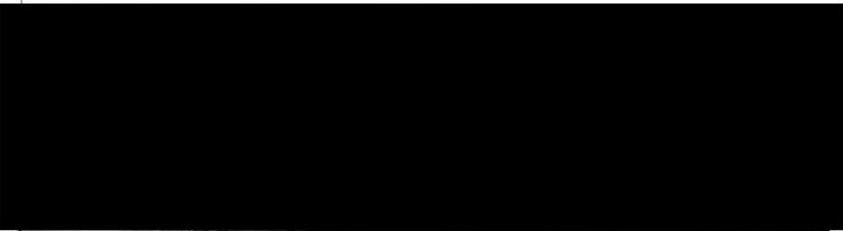
**5. APPELLANT:**

If you do not have an attorney or a representative, please enter the address where documents related to this appeal should be sent:

Mailing Address:

Personal Email:

Home/Cell Phone:



<b>SIGNATURE OF APPELLANT</b> Ron M. Willis 	<b>DATE</b> Nov 13, 2023
<b>SIGNATURE OF ATTORNEY OR REPRESENTATIVE:</b> (IF FILLING OUT THIS FORM):	<b>DATE</b>