



CITY OF KEY WEST  
DISCIPLINARY DOCUMENTATION FORM

**EMPLOYEE INFORMATION**

Name: Sean T. Brandenburg  
Job Title / Department: Chief of Police / KWPD

**INCIDENT**

Date/Time of Incident: July 15, 2020  
Location of Incident: 1441 12th Street

Description of Incident:

Chief Brandenburg knowingly permitted 2 Captains, 1 Lieutenant and 6 Key West police officers, all on duty, in full uniform and operating City vehicles, assist him with moving into his current home.

Witnesses to Incident: \_\_\_\_\_

Was this incident in violation of a City Policy \_\_\_\_\_ and/or department policy? \_\_\_\_\_

If yes, specify which City policy, group and number and/or attach copy of department policy:

\_\_\_\_\_

**ACTION**

\_\_\_\_ Verbal Warning      \_\_\_\_ Written Warning      XX Suspension      \_\_\_\_ Termination

(Notify HR to schedule predetermination hearing)

Employee placed on paid administrative leave pending predetermination hearing?     Yes     No

The administrative remedial action administered will be (5) days suspension, unpaid. Monetary restitution will equal one hour of pay for each on-duty officer involved, total amount to be paid for restitution is \$681.27.

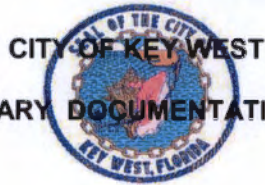
Employee Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of person preparing report: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of employee: Sean T. Brandenburg Date: 10/6/20

Signature of Department Head / Manager: \_\_\_\_\_ Date: 10/6/20

Original to HR Dept  
Copy to Dept. File & Employee



CITY OF KEY WEST  
DISCIPLINARY DOCUMENTATION FORM

**EMPLOYEE INFORMATION**

Name: Juan R. Torres

Job Title / Department: Captain / KWPD

**INCIDENT**

Date/Time of Incident: July 15, 2020

Location of Incident: 1441 12th Street

Description of Incident:

Captain Torres knowingly permitted 1 Lieutenant and 6 Key West police officers, all on duty, in full uniform and operating City vehicles, to assist Chief Brandenburg with moving into his current home.

Witnesses to Incident: \_\_\_\_\_

Was this incident in violation of a City Policy \_\_\_\_\_ and/or department policy? \_\_\_\_\_

If yes, specify which City policy, group and number and/or attach copy of department policy:

\_\_\_\_\_

**ACTION**

\_\_\_ Verbal Warning    \_\_\_ Written Warning    XX Suspension    \_\_\_ Termination

(Notify HR to schedule predetermination hearing)

Employee placed on paid administrative leave pending predetermination hearing?     Yes     No

The administrative remedial action administered will be (3) days suspension, unpaid.

Employee Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signature of person preparing report: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of employee: [Signature] Date: 10/16/20

Signature of Department Head / Manager: [Signature] Date: 10/16/20

Original to HR Dept  
Copy to Dept. File & Employee



CITY OF KEY WEST  
DISCIPLINARY DOCUMENTATION FORM

**EMPLOYEE INFORMATION**

Name: Randall G. Smith  
Job Title / Department: Captain / KWPD

**INCIDENT**

Date/Time of Incident: July 15, 2020  
Location of Incident: 1441 12th Street

Description of Incident:

Captain Smith knowingly permitted 1 Lieutenant and 6 Key West police officers, all on duty, in full uniform and operating City vehicles, to assist Chief Brandenburg with moving into his current home.

Witnesses to Incident: \_\_\_\_\_

Was this incident in violation of a City Policy \_\_\_\_\_ and/or department policy? \_\_\_\_\_

If yes, specify which City policy, group and number and/or attach copy of department policy:

\_\_\_\_\_

**ACTION**

\_\_\_\_ Verbal Warning      \_\_\_\_ Written Warning      XX Suspension      \_\_\_\_ Termination

(Notify HR to schedule predetermination hearing)

Employee placed on paid administrative leave pending predetermination hearing?     Yes     No

The administrative remedial action administered will be (3) days suspension, unpaid.

Employee Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of person preparing report: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of employee: CAPT. R. Smith 2935 Date: 10/6/20

Signature of Department Head / Manager: \_\_\_\_\_ Date: 10/6/20

Original to HR Dept  
Copy to Dept. File & Employee