

Appendix B

INELIGIBLE VOLUNTEER RECORD SHEET REGISTRATION SERVICE BOY SCOUTS OF AMERICA

Council No. 368 Date 1/3/91
Full name Lee A. Reich
(no initials if you can possibly get full name)
Social Security Number [REDACTED]
Address [REDACTED]
City N. Pitcher State N.Y. ZIP Code 13124
Date of Birth 1/19/56 (This is important and should be exact)
Approximate age 34 (To be used ONLY when date of birth is not known)
Religion unknown Nationality unknown
Occupation Driver Education _____
Weight 150 lb Height 5'8" Race white
Color of hair sandy Color of eyes blue
Outstanding characteristics or interests _____
Married or single married Children _____
(Number, ages, and names, if possible)
Spouse's name _____
Scouting connections: Chartered organization: _____
Unit No. _____ City _____ State _____
Position _____ Date registered _____ Date resigned _____
Special recognition _____
Suspended or denied registration for following reasons: _____

SPECIFY THE FACTS THAT LEAD YOU TO RECOMMEND DENIAL OF REGISTRATION, INCLUDING HOW THE INFORMATION CAME TO THE COUNCIL'S ATTENTION, AND LIST ATTACHED SUPPORTING DOCUMENTS (STATE ONLY KNOWN FACTS, NOT RUMOR, CONJECTURE, OR SPECULATION):

Signed [Signature]
SCOUT EXECUTIVE
Council 368

NOTED

FEB 01 1991

JOSEPH L ANGLIM

16

CONFIDENTIAL

JAN 18 1991

F. STARON

February 4, 1991

Mr. John Anthony
Scout Executive
Susquenango Council, No. 368

PERSONAL AND CONFIDENTIAL

SUBJECT: LEE A. REICH

Dear John:

Thank you for the detailed information sent concerning the above Scouter. This case has been reviewed with our attorney and is now on our permanent Ineligible Volunteer File.

Sincerely,

Paul Ernst, Director
Registration and Statistical Service

eko

cc: Charles D. Ball, Northeast Region

READY FOR FILE
FEB 04 1991
ERIN O'RILEY

CONF018948

BOY SCOUTS OF AMERICA ADULT APPLICATION

UNIT SCOUTERS

Check one

Pack No. 73

Troop No. _____

Team No. _____

Post No. _____

Ship No. _____

COUNCIL/DISTRICT SCOUTERS

Council/District position

District name

Please print one letter in each space—press hard; you are making four copies.

First name and initial: L e e A

Last name: R e i c h

Social Security number (optional)

Address—street or R.F.D. _____

Additional address information (if necessary) _____

City: W a s h i n g t o n

State: N Y

ZIP code: 1 3 1 2 4 -

Home phone: _____

Business phone: _____

Date of birth: 0 1 / 1 9 5 6

Month Day Year

Training (see cover)

Position Code (see cover)

Occupation, employer, and business address

New leader

Transfer

Former leader

Sex: M

U. S. citizen:

Years at this employment:

Boys' Life:

Driver's license No. _____ State: N.Y. Expiration: _____

1. Scouting background

Position: No Council: _____ Year: _____

2. Experience working with youth in other organizations?

No

3. Previous residences (for last 5 years).

City: _____ State: _____

4. Current memberships (religious, community, business, labor, or professional organizations).

5. References. Please list those who are familiar with your character as it relates to working with youth. References will be checked when necessary.

Name: Cheryl Massman

Name: Edward Calhoun

Name: Kevin Moon

6. Additional information.

a. Do you use illegal drugs? Yes No

b. Have you ever been convicted of a criminal offense? (If yes, explain below.) Yes No

c. Have you ever been charged with child neglect or abuse? Yes No

d. Has your driver's license ever been suspended or revoked? (If yes, explain below.) Yes No

e. Other than the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance, and care of young people? (If yes, explain below.) Yes No

1970-1980 in state of Florida child abuse (3 yrs sentence)

I understand that:

a. The information that I have provided may be verified, if necessary, by contacting persons or organizations named in this application, or by contacting any person or organization that may have information concerning me. I hereby release and agree to hold harmless from liability any person or organization that provides information. I also agree to hold harmless the chartered organization, local council, Boy Scouts of America, and the officers, employees, and volunteers thereof.

b. In signing this application, I affirm that the information I have given is true and correct.

Signature of applicant: X Lee A Reich date: 17 Dec 90

APPROVALS FOR UNIT SCOUTERS

To the best of our knowledge, this applicant meets the leadership standards of the Boy Scouts of America:

Signature of unit committee chairman: Irving Raymond

Date: 17 Dec 90

Signature of chartered organization head or chartered organization representative: Robert Clark

Date: 12-17-90

Signature of Scout executive or designee: _____

Date: _____

APPROVAL FOR COUNCIL/DISTRICT SCOUTERS

To the best of my knowledge, this applicant meets the leadership standards of the Boy Scouts of America:

Signature of Scout executive or designee: _____

Date: _____

Registration fee: 40

Boys' Life fee: 0

Term (months): 04

Unit renewal date: 0391

Month Year

If applicant has an unexpired membership certificate, registration may be accomplished by paying \$1 for processing the transfer. Check the box and attach certificate. It will be returned by the council.

FOR COUNCIL USE

Transfer from:

Council: _____ Nat'l unit No.: _____ Member ID No.: _____

CALL BACK REQUESTED

COUNCIL # 368

PHONE NO: [REDACTED]

On-Line _____

Batch _____

CALLER: John Anthony

POSITION: SE

TYPE OF PROBLEM

REGISTRATION _____

VETERANS _____

DEBIT _____

CREDIT _____

PROGRAM CODE

& UNIT #

RENEWAL DATE

TRANSMITTAL #

ID #

FILM #

Application came in mail. Adult
 ✓'ed that he had been convicted of
 Child molestation won't approve. Wants
 to know how to refuse registration.
 I told SE we should also place
 on file.

SOLUTION:

LEE A. REICH

1/10/89 CAMPING

Added to IV file
 No reg to delete
 1/2/91
 cm

NAME

Chore

DATE

12-27-90

TIME