



TENNESSEE PEACE OFFICER STANDARDS AND TRAINING COMMISSION

CHANGE OF STATUS

NAME: Mills, Jr. (Last), Desmond (First), A. (Middle)

DEPARTMENT: Memphis Police Department CERTIFICATION NUMBER: 3881-6075

SEPARATION: This is to notify the POST Commission that the named officer is no longer employed by this department as indicated below:

- Type of Separation: Resigned, Retired, Terminated, Discharged, Other. Effective Date (mm/dd/yyyy). Reason: _____

New Employer, if known _____

CHANGE OF NAME/RANK: From _____ to _____ Effective Date of Change: _____

LEAVE: This officer has been granted leave as indicated: From: 01 / 08 / 2023 To: _____

- Administrative, Educational, Military, Medical, Maternity

Returned to full time status on: _____

SUSPENSION: This officer has been suspended for a period of thirty (30) days or more From: _____ To: _____ for the following reason(s)

Officer relieved of duty effective January 8, 2023.

FOR POST USE ONLY File _____ DOE _____ / _____ / _____ Card: 4x6 _____ 3x5 _____ DOB: _____ DOC: _____ / _____ / _____ #: _____

Cerelyn J. Davis (Signature)

Signature of Agency Head

Cerelyn J. Davis

Print/Type Name of Agency Head

Memphis Police Department

AGENCY



TENNESSEE
PEACE OFFICER STANDARDS AND TRAINING COMMISSION

CHANGE OF STATUS

NAME: Mills, Jr. , Desmond , A.
(Last) (First) (Middle)

DEPARTMENT: Memphis Police Department CERTIFICATION NUMBER: 3881-6075

SEPARATION: This is to notify the POST Commission that the named officer is no longer employed by this department as indicated below:

Type of Separation	Effective Date (mm/dd/yyyy)	Reason:
<input type="checkbox"/> Resigned	____/____/____	
<input type="checkbox"/> Retired	____/____/____	
<input checked="" type="checkbox"/> Terminated	01 / 20 / 2023	_____
<input type="checkbox"/> Discharged	____/____/____	_____
<input type="checkbox"/> Other	____/____/____	

New Employer, if known _____

CHANGE OF NAME/RANK: From _____ to _____
Effective Date of Change: ____/____/____

LEAVE: This officer has been granted leave as indicated:
From: ____/____/____ To: ____/____/____

<input type="checkbox"/> Administrative	<input type="checkbox"/> Educational	<input type="checkbox"/> Military
<input type="checkbox"/> Medical	<input type="checkbox"/> Maternity	

Returned to full time status on: ____/____/____

SUSPENSION: This officer has been suspended for a period of thirty (30) days or more
From: ____/____/____ To: ____/____/____ for the following reason(s)

FOR POST USE ONLY	
File _____	DOE ____/____/____
Card: 4x6 _____	3x5 _____ DOB: _____
DOC: ____/____/____	#: _____

Cerelyn J. Davis
Signature of Agency Head

Cerelyn J. Davis
Print/Type Name of Agency Head

Memphis Police Department
AGENCY



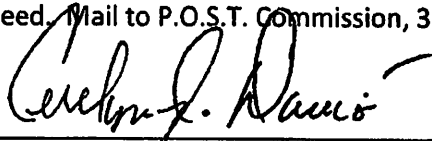
**Peace Officer Standards and Training Commission
Decertification Request**

Agency Requesting Decertification: Memphis Police Department
Name of Officer: Desmond Mills, Jr. PSID#: 3881-6075
Address: 5456 Gemstone Way City/State: Memphis, TN 38109

Please check all that apply:

- 1. Convicted of any state or by federal government of any crime the punishment which could have been imprisonment in a federal or state prison or institution; or
- 2. Convicted of or pleaded guilty to or entered a plea of nolo contendere to any felony charge or to any violation of any federal or state laws or city ordinances relating to force, violence, theft, dishonesty, gambling, liquor and other alcoholic beverages, controlled substances, or a sufficient number of misdemeanors to establish a pattern of disregard for the law; or
- 3. Suspended or discharged 30 days or longer, resign in lieu of termination, resign with disciplinary action pending that could have resulted in termination, or discharged by his/her employing law enforcement agency for disciplinary reasons; or
- 4. Found to have supplied or acquiesced in false information being supplied to the P.O.S.T. Commission regarding eligibility for certification; or
- 5. Fail to participate in a 40 hour in-service training program each calendar year; or
- 6. Fail to maintain pre-employment requirements.

*All supporting documentation **must** be attached in order for the P.O.S.T. Commission to proceed. Mail to P.O.S.T. Commission, 3025 Lebanon Rd., Nashville, Tn. 37214



Date: 01 / 25 / 2023

Signature of Law Enforcement Agency Head

Cerelyn J. Davis

Print Name



TENNESSEE
PEACE OFFICER STANDARDS AND TRAINING COMMISSION

CHANGE OF STATUS

NAME: Martin, III, Emmitt
(Last) (First) (Middle)

DEPARTMENT: Memphis Police Department CERTIFICATION NUMBER: 4834-2715

SEPARATION: This is to notify the POST Commission that the named officer is no longer employed by this department as indicated below:

Type of Separation Effective Date (mm/dd/yyyy)

Resigned _____/_____/_____

Retired _____/_____/_____

Terminated _____/_____/_____

Reason: _____

Discharged _____/_____/_____

Other _____/_____/_____

New Employer, if known _____

CHANGE OF NAME/RANK: From _____ to _____
Effective Date of Change: _____/_____/_____

LEAVE: This officer has been granted leave as indicated:
From: 01 / 08 / 2023 To: _____/_____/_____

Administrative Educational Military

Medical Maternity

Returned to full time status on: _____/_____/_____

SUSPENSION: This officer has been suspended for a period of thirty (30) days or more
From: _____/_____/_____ To: _____/_____/_____ for the following reason(s)

Officer relieved of duty effective January 8, 2023.

FOR POST USE ONLY
File _____ DOE _____/_____/_____
Card: 4x6 _____ 3x5 _____ DOB: _____
DOC: _____/_____/_____ #: _____

Signature of Agency Head

Cerelyn J. Davis
Print/Type Name of Agency Head

Memphis Police Department
AGENCY



**TENNESSEE
PEACE OFFICER STANDARDS AND TRAINING COMMISSION
CHANGE OF STATUS**

NAME: Martin, III, Emmitt
(Last) (First) (Middle)

DEPARTMENT: Memphis Police Department **CERTIFICATION NUMBER:** 4834-2715

SEPARATION: This is to notify the POST Commission that the named officer is no longer employed by this department as indicated below:

Type of Separation **Effective Date** (mm/dd/yyyy)

Resigned _____/_____/_____

Retired _____/_____/_____

Terminated 01 / 20 / 2023 Reason: _____

Discharged _____/_____/_____

Other _____/_____/_____

New Employer, if known _____

CHANGE OF NAME/RANK: From _____ to _____
 Effective Date of Change: _____/_____/_____

LEAVE: This officer has been granted leave as indicated:
 From: _____/_____/_____ To: _____/_____/_____

Administrative Educational Military

Medical Maternity

Returned to full time status on: _____/_____/_____

SUSPENSION: This officer has been suspended for a period of thirty (30) days or more
 From: _____/_____/_____ To: _____/_____/_____ for the following reason(s)

FOR POST USE ONLY	
File _____	DOE _____/_____/_____
Card: 4x6 _____	3x5 _____ DOB: _____
DOC: _____/_____/_____	#: _____

 Signature of Agency Head

Cerelyn J. Davis

 Print/Type Name of Agency Head

Memphis Police Department

 AGENCY



**Peace Officer Standards and Training Commission
Decertification Request**

Agency Requesting Decertification: Memphis Police Department
Name of Officer: Emmitt Martin III PSID#: 4834-2715
Address: 5794 Pecan Trace City/State: Bartlett, TN 38135

Please check all that apply:

- 1. Convicted of any state or by federal government of any crime the punishment which could have been imprisonment in a federal or state prison or institution; or
- 2. Convicted of or pleaded guilty to or entered a plea of nolo contendere to any felony charge or to any violation of any federal or state laws or city ordinances relating to force, violence, theft, dishonesty, gambling, liquor and other alcoholic beverages, controlled substances, or a sufficient number of misdemeanors to establish a pattern of disregard for the law; or
- 3. Suspended or discharged 30 days or longer, resign in lieu of termination, resign with disciplinary action pending that could have resulted in termination, or discharged by his/her employing law enforcement agency for disciplinary reasons; or
- 4. Found to have supplied or acquiesced in false information being supplied to the P.O.S.T. Commission regarding eligibility for certification; or
- 5. Fail to participate in a 40 hour in-service training program each calendar year; or
- 6. Fail to maintain pre-employment requirements.

*All supporting documentation **must** be attached in order for the P.O.S.T. Commission to proceed. Mail to P.O.S.T. Commission, 3025 Lebanon Rd., Nashville, Tn. 37214

Cerelyn J. Davis

Date: 01 / 25 / 2023

Signature of Law Enforcement Agency Head

Cerelyn J. Davis

Print Name



TENNESSEE
PEACE OFFICER STANDARDS AND TRAINING COMMISSION

CHANGE OF STATUS

NAME: Smith, Justin, L.
(Last) (First) (Middle)

DEPARTMENT: Memphis Police Department CERTIFICATION NUMBER: 0775-3619

SEPARATION: This is to notify the POST Commission that the named officer is no longer employed by this department as indicated below:

Type of Separation Effective Date (mm/dd/yyyy)

Resigned _____/_____/_____

Retired _____/_____/_____

Terminated _____/_____/_____

Reason: _____

Discharged _____/_____/_____

Other _____/_____/_____

New Employer, if known _____

CHANGE OF NAME/RANK: From _____ to _____
Effective Date of Change: _____/_____/_____

LEAVE: This officer has been granted leave as indicated:
From: 01 / 08 / 2023 To: _____/_____/_____

Administrative Educational Military

Medical Maternity

Returned to full time status on: _____/_____/_____

SUSPENSION: This officer has been suspended for a period of thirty (30) days or more
From: _____/_____/_____ To: _____/_____/_____ for the following reason(s)

Officer relieved of duty effective January 8, 2023.

FOR POST USE ONLY
File _____ DOE _____/_____/_____
Card: 4x6 _____ 3x5 _____ DOB: _____
DOC: _____/_____/_____ #: _____

Signature of Agency Head

Cerelyn J. Davis
Print/Type Name of Agency Head

Memphis Police Department
AGENCY



TENNESSEE
PEACE OFFICER STANDARDS AND TRAINING COMMISSION

CHANGE OF STATUS

NAME: Smith, Justin, L.
(Last) (First) (Middle)

DEPARTMENT: Memphis Police Department CERTIFICATION NUMBER: 0775-3619

SEPARATION: This is to notify the POST Commission that the named officer is no longer employed by this department as indicated below:

Type of Separation Effective Date (mm/dd/yyyy)

Resigned _____/_____/_____

Retired _____/_____/_____

Terminated 01 / 20 / 2023

Reason: _____

Discharged _____/_____/_____

Other _____/_____/_____

New Employer, if known _____

CHANGE OF NAME/RANK: From _____ to _____
Effective Date of Change: _____/_____/_____

LEAVE: This officer has been granted leave as indicated:
From: _____/_____/_____ To: _____/_____/_____

Administrative Educational Military

Medical Maternity

Returned to full time status on: _____/_____/_____

SUSPENSION: This officer has been suspended for a period of thirty (30) days or more
From: _____/_____/_____ To: _____/_____/_____ for the following reason(s)

FOR POST USE ONLY
File _____ DOE _____/_____/_____
Card: 4x6 _____ 3x5 _____ DOB: _____
DOC: _____/_____/_____ #: _____

Signature of Agency Head

Cerelyn J. Davis
Print/Type Name of Agency Head

Memphis Police Department
AGENCY



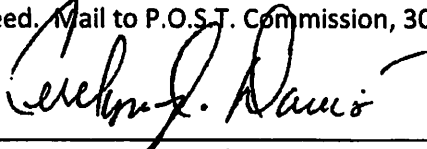
**Peace Officer Standards and Training Commission
Decertification Request**

Agency Requesting Decertification: Memphis Police Department
Name of Officer: Justin L. Smith PSID#: 0775-3619
Address: 147 Donnybrook Dr. City/State: Atoka, TN 38004

Please check all that apply:

- 1. Convicted of any state or by federal government of any crime the punishment which could have been imprisonment in a federal or state prison or institution; or
- 2. Convicted of or pleaded guilty to or entered a plea of nolo contendere to any felony charge or to any violation of any federal or state laws or city ordinances relating to force, violence, theft, dishonesty, gambling, liquor and other alcoholic beverages, controlled substances, or a sufficient number of misdemeanors to establish a pattern of disregard for the law; or
- 3. Suspended or discharged 30 days or longer, resign in lieu of termination, resign with disciplinary action pending that could have resulted in termination, or discharged by his/her employing law enforcement agency for disciplinary reasons; or
- 4. Found to have supplied or acquiesced in false information being supplied to the P.O.S.T. Commission regarding eligibility for certification; or
- 5. Fail to participate in a 40 hour in-service training program each calendar year; or
- 6. Fail to maintain pre-employment requirements.

*All supporting documentation **must** be attached in order for the P.O.S.T. Commission to proceed. Mail to P.O.S.T. Commission, 3025 Lebanon Rd., Nashville, Tn. 37214



Date: 1, 25, 2023

Signature of Law Enforcement Agency Head

Cerelyn J. Davis

Print Name



TENNESSEE
PEACE OFFICER STANDARDS AND TRAINING COMMISSION

CHANGE OF STATUS

NAME: Bean Tadarius M.
(Last) (First) (Middle)

DEPARTMENT: Memphis Police Department CERTIFICATION NUMBER: 3916-2465

SEPARATION: This is to notify the POST Commission that the named officer is no longer employed by this department as indicated below:

Type of Separation	Effective Date (mm/dd/yyyy)	Reason:
<input type="checkbox"/> Resigned	____/____/____	_____
<input type="checkbox"/> Retired	____/____/____	_____
<input type="checkbox"/> Terminated	____/____/____	_____
<input type="checkbox"/> Discharged	____/____/____	_____
<input type="checkbox"/> Other	____/____/____	_____

New Employer, if known _____

CHANGE OF NAME/RANK: From _____ to _____
Effective Date of Change: ____/____/____

LEAVE: This officer has been granted leave as indicated:
From: 01 / 08 / 2023 To: ____/____/____

- Administrative Educational Military
- Medical Maternity

Returned to full time status on: ____/____/____

SUSPENSION: This officer has been suspended for a period of thirty (30) days or more
From: ____/____/____ To: ____/____/____ for the following reason(s)

Officer relieved of duty effective January 8, 2023.

FOR POST USE ONLY	
File _____	DOE ____/____/____
Card: 4x6 _____	3x5 _____ DOB: _____
DOC: ____/____/____	#: _____

Signature of Agency Head

Cerelyn J. Davis

Print/Type Name of Agency Head

Memphis Police Department

AGENCY



TENNESSEE
PEACE OFFICER STANDARDS AND TRAINING COMMISSION

CHANGE OF STATUS

NAME: Bean, Tadarrius, M.
(Last) (First) (Middle)

DEPARTMENT: Memphis Police Department CERTIFICATION NUMBER: 3916-2465

SEPARATION: This is to notify the POST Commission that the named officer is no longer employed by this department as indicated below:

Type of Separation	Effective Date (mm/dd/yyyy)	Reason:
<input type="checkbox"/> Resigned	____/____/____	
<input type="checkbox"/> Retired	____/____/____	
<input checked="" type="checkbox"/> Terminated	01 / 20 / 2023	_____
<input type="checkbox"/> Discharged	____/____/____	_____
<input type="checkbox"/> Other	____/____/____	

New Employer, if known _____

CHANGE OF NAME/RANK: From _____ to _____
Effective Date of Change: ____/____/____

LEAVE: This officer has been granted leave as indicated:
From: ____/____/____ To: ____/____/____

- Administrative Educational Military
- Medical Maternity

Returned to full time status on: ____/____/____

SUSPENSION: This officer has been suspended for a period of thirty (30) days or more
From: ____/____/____ To: ____/____/____ for the following reason(s)

FOR POST USE ONLY	
File _____	DOE ____/____/____
Card: 4x6 _____	3x5 _____ DOB: _____
DOC: ____/____/____	#: _____

Signature of Agency Head

Cerelyn J. Davis
Print/Type Name of Agency Head

Memphis Police Department
AGENCY



**Peace Officer Standards and Training Commission
Decertification Request**

Agency Requesting Decertification: Memphis Police Department
Name of Officer: Tedarius M. Bean PSID#: 3916-2465
Address: 9952 Cerise Ave. City/State: Cordova, TN 38016

Please check all that apply:

- 1. Convicted of any state or by federal government of any crime the punishment which could have been imprisonment in a federal or state prison or institution; or
- 2. Convicted of or pleaded guilty to or entered a plea of nolo contendere to any felony charge or to any violation of any federal or state laws or city ordinances relating to force, violence, theft, dishonesty, gambling, liquor and other alcoholic beverages, controlled substances, or a sufficient number of misdemeanors to establish a pattern of disregard for the law; or
- 3. Suspended or discharged 30 days or longer, resign in lieu of termination, resign with disciplinary action pending that could have resulted in termination, or discharged by his/her employing law enforcement agency for disciplinary reasons; or
- 4. Found to have supplied or acquiesced in false information being supplied to the P.O.S.T. Commission regarding eligibility for certification; or
- 5. Fail to participate in a 40 hour in-service training program each calendar year; or
- 6. Fail to maintain pre-employment requirements.

*All supporting documentation **must** be attached in order for the P.O.S.T. Commission to proceed. Mail to P.O.S.T. Commission, 3025 Lebanon Rd., Nashville, Tn. 37214

Cerelyn J. Davis Date: 01, 25, 2023
Signature of Law Enforcement Agency Head
Cerelyn J. Davis
Print Name



TENNESSEE
PEACE OFFICER STANDARDS AND TRAINING COMMISSION

CHANGE OF STATUS

NAME: Haley Demetrius
(Last) (First) (Middle)

DEPARTMENT: Memphis Police Department CERTIFICATION NUMBER: 2072-1713

SEPARATION: This is to notify the POST Commission that the named officer is no longer employed by this department as indicated below:

Type of Separation Effective Date (mm/dd/yyyy)

Resigned _____/_____/_____

Retired _____/_____/_____

Terminated _____/_____/_____

Reason: _____

Discharged _____/_____/_____

Other _____/_____/_____

New Employer, if known _____

CHANGE OF NAME/RANK: From _____ to _____
Effective Date of Change: _____/_____/_____

LEAVE: This officer has been granted leave as indicated:
From: 01 / 08 / 2023 To: _____/_____/_____

Administrative Educational Military

Medical Maternity

Returned to full time status on: _____/_____/_____

SUSPENSION: This officer has been suspended for a period of thirty (30) days or more
From: _____/_____/_____ To: _____/_____/_____ for the following reason(s)

Officer relieved of duty effective January 8, 2023.

FOR POST USE ONLY
File _____ DOE _____/_____/_____
Card: 4x6 _____ 3x5 _____ DOB: _____
DOC: _____/_____/_____ #: _____

Cerelyn J. Davis

Signature of Agency Head

Cerelyn J. Davis

Print/Type Name of Agency Head

Memphis Police Department

AGENCY



TENNESSEE
PEACE OFFICER STANDARDS AND TRAINING COMMISSION

CHANGE OF STATUS

NAME: Haley, Demetrius, J.
(Last) (First) (Middle)

DEPARTMENT: Memphis Police Department CERTIFICATION NUMBER: 2072-1713

SEPARATION: This is to notify the POST Commission that the named officer is no longer employed by this department as indicated below:

Type of Separation Effective Date (mm/dd/yyyy)

Resigned _____/_____/_____

Retired _____/_____/_____

Terminated 01/20/2023

Reason: _____

Discharged _____/_____/_____

Other _____/_____/_____

New Employer, if known _____

CHANGE OF NAME/RANK: From _____ to _____
Effective Date of Change: _____/_____/_____

LEAVE: This officer has been granted leave as indicated:
From: _____/_____/_____ To: _____/_____/_____

Administrative Educational Military

Medical Maternity

Returned to full time status on: _____/_____/_____

SUSPENSION: This officer has been suspended for a period of thirty (30) days or more
From: _____/_____/_____ To: _____/_____/_____ for the following reason(s)

FOR POST USE ONLY
File _____ DOE _____/_____/_____
Card: 4x6 _____ 3x5 _____ DOB: _____
DOC: _____/_____/_____ #: _____

Signature of Agency Head

Cerelyn J. Davis
Print/Type Name of Agency Head

Memphis Police Department
AGENCY



**Peace Officer Standards and Training Commission
Decertification Request**

Agency Requesting Decertification: Memphis Police Department
Name of Officer: Demetrius Haley PSID#: 2072-1713
Address: 9057 Snow Drift Lane City/State: Cordova, TN 38018

Please check all that apply:

- 1. Convicted of any state or by federal government of any crime the punishment which could have been imprisonment in a federal or state prison or institution; or
- 2. Convicted of or pleaded guilty to or entered a plea of nolo contendere to any felony charge or to any violation of any federal or state laws or city ordinances relating to force, violence, theft, dishonesty, gambling, liquor and other alcoholic beverages, controlled substances, or a sufficient number of misdemeanors to establish a pattern of disregard for the law; or
- 3. Suspended or discharged 30 days or longer, resign in lieu of termination, resign with disciplinary action pending that could have resulted in termination, or discharged by his/her employing law enforcement agency for disciplinary reasons; or
- 4. Found to have supplied or acquiesced in false information being supplied to the P.O.S.T. Commission regarding eligibility for certification; or
- 5. Fail to participate in a 40 hour in-service training program each calendar year; or
- 6. Fail to maintain pre-employment requirements.

*All supporting documentation **must** be attached in order for the P.O.S.T. Commission to proceed. Mail to P.O.S.T. Commission, 3025 Lebanon Rd., Nashville, Tn. 37214

Date: 01 / 25 / 2023

Signature of Law Enforcement Agency Head

Cerelyn J. Davis

Print Name