

Appendix B

INELIGIBLE VOLUNTEER RECORD SHEET REGISTRATION SERVICE BOY SCOUTS OF AMERICA

Council No. 544 Date October 10, 1990

Full name Charles E. Beasley
(no initials if you can possibly get full name)

Social Security Number _____

Address _____

City Wellsville State PA ZIP Code 17365

Date of Birth Not Known (This is important and should be exact.)

Approximate age 55+ (To be used ONLY when date of birth is not known.)

Religion Not Known Nationality -----

Occupation Truck Driver Education -----

Weight _____ Height _____ Race _____

Color of hair _____ Color of eyes _____

Outstanding characteristics or interests _____

Married or single Live-in Children Not Known
(Number, ages, and names, if possible)

Spouse's name Not Married (Live-in)

Scouting connections: Chartered organization: _____

Unit No. S-0146 City Wellsville State PA

Position COR Date registered 6/6/87 Date resigned Today

Special recognition None

Suspended or denied registration for following reasons: Accused as a child molester in 1974+. Charles indicated a trial in 1974.

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):

*Please see **NOTED** enclosed letter. Signed [Signature] SCOUT EXECUTIVE

CONFIDENTIAL NOV 20 1990 Council York-Adams Area Council #544

JOSEPH L ANGLIM

OCT 17 1990

F. STARON

November 26, 1990

Mr. Richard M. Rogers
Scout Executive
York Adams Area Council, No. 544

PERSONAL AND CONFIDENTIAL SUBJECT: CHARLES E. BEASLEY

Dear Rich:

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.

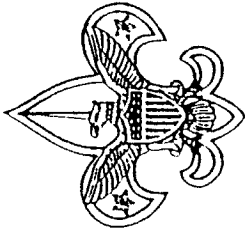
Sincerely,

Paul Ernst, Director
Registration and Statistical Service

eko

cc: Northeast Region

new 10 file
NOV 26 1990
ERIN ORILEY



A program for Cub Scouts, Boy Scouts, and Explorers

**YORK-ADAMS AREA COUNCIL 544
BOY SCOUTS OF AMERICA**

800 E. KING STREET, YORK, PA 17403-1797 717-843-0901

COPY

October 10, 1990

Mr. Charles E. Beasley
[REDACTED]
Wellsville, PA 17365

Dear Mr. Beasley:

After careful review, we have decided that your registration with the Boy Scouts of America should be denied. We are therefore compelled to request that you sever any relations that you may have with the Boy Scouts of America.

You should understand that BSA membership registration is a privilege and is not automatically granted to everyone who applies. We reserve the right to refuse registration whenever there is a concern that an individual may not meet the high standards of membership which the BSA seeks to provide for American youth.

If you wish to have this decision reviewed by a BSA regional review committee, please write to the regional director within 60 days of the date of this letter, explaining your version of the facts supporting your claim that your registration as a BSA member should be reinstated. The procedures for a review of this decision are attached.

Sincerely,

Richard N. Rogers
SCOUT EXECUTIVE

RNR/kl

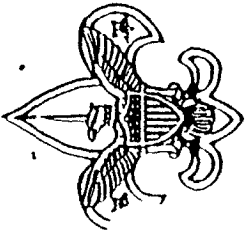
Enclosure

Member of The United Way of York County and Adams County

REMEMBER THE YORK-ADAMS AREA COUNCIL, BOY SCOUTS OF AMERICA, IN YOUR WILL



CONF005120



A program for Cub Scouts, Boy Scouts, and Explorers

**YORK-ADAMS AREA COUNCIL 544
BOY SCOUTS OF AMERICA**

800 E. KING STREET, YORK, PA 17403-1797 717-843-0901

CONFIDENTIAL

September 26, 1990

[REDACTED]

c/o York County Children
and Youth Services

[REDACTED]

York, PA 17402

Dear [REDACTED]

Please find enclosed a letter with regard to Charles Beasley. This is the additional information I telephoned you about Wednesday, September 21, 1990.

I am certain Dallas Trembley will be of help with more recent concerns.

Thank you for your immediate attention and your advice.

Sincerely,

Richard N. Rogers
SCOUT EXECUTIVE

RNR/kl

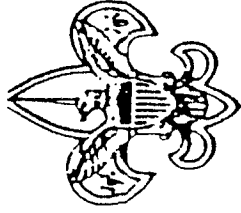
Enclosure



Member of The United Way of York County and Adams County

REMEMBER THE YORK-ADAMS AREA COUNCIL, BOY SCOUTS OF AMERICA, IN YOUR WILL

KOOTAGA AREA



CENTRAL WEST VIRGINIA

Reported by
8/16/90

COUNCIL 618

RECEIVED

SEP 13 1990

August 17, 1990

YORK ADAMS AREA
COUNCIL #514

York Adams Area Council
c/o Francis J. Kiger, Scout Executive
York, Pennsylvania 17401

Dear Mr. Kiger:

I am writing in response to an incident that occurred on July 9, 1990 involving one of your unit leaders in Troop 146. The incident occurred at Camp Kootaga in Walker, W. VA.

As part of our camp program we ask all leaders in camp to attend a session on youth protection. Following our session an Assistant Scoutmaster from Troop 146, Mr. Charles Beasley, spoke to me about a serious matter. I will try to explain the incidents that transpired.

During the session I spoke on the subject of the adult registration process. In summary, we centered our discussion around question six of the Adult Registration form #28-501C. We briefly discussed the National file set up to formulate a record of those whose membership had been suspended with the Boy Scouts of America.

Following our session Mr. Beasley approached me concerning his involvement in a trial in 1974 centering around child molestation. Mr. Beasley was the accused. (The results of the trial is beyond my knowledge.)

I also feel it is necessary to point out another incident involving Mr. Beasley. On the morning of July 9, 1990 @ 7:30 A. M., two members of the Camp Kootaga Staff proceeded to the youth showering facilities for the daily sanitizing. When entering the facility the staff members witnessed Mr. Beasley in the sitting position on the floor in the nude, while [redacted] was showering.

In my discussion with Mr. Beasley he was deeply concerned with [redacted] appearance. To quote Mr. Beasley, "Do you think [redacted] has the signs of an abused child?" Mr. Beasley's question was a direct result of our session on youth protection and the topic of "the signs of an abused child".

I was later approached by Mr. Dallas Trembley (Scoutmaster 146) and Allan Hoffman (Assistant Scoutmaster 146). Mr. Trembley and Mr. Hoffman were deeply disturbed and upset concerning the incidents that transpired on July 9, 1990. Mr. Trembley stated his opinion that Mr. Beasley should be removed from the Scouting movement. Mr. Hoffman was present during my talk with Mr. Beasley.

Page 2
York Adams Area Council
August 17, 1990

In closing, I would like to express my personal concern as a Scout Professional and Camp Director. I feel Mr. Beasley has placed himself in a questionable situation and has misled his Troop committee concerning his personal background. I also feel Mr. Beasley falsified information on the Adult Application Form #28-501C question 6a and 6e. However, the decision is entirely up to the York Area Council. I would also like to point out that my opinion is not necessarily the opinion of the Kootaga Area Council or any member thereof.

If you have any further questions or comments feel free to contact me at [REDACTED] or call the Scout Service Center at [REDACTED]

Yours in Scouting,



J. Scott Cleland
Camp Director
Camp Kootaga

JSC/lma

cc: Mike Jones
Scout Executive
Council #618

R. CH ROBERTS, SE. 10-3-90
CE 544

SW/46 12-87 # 019851

COPIES IN ~~BRITAIN~~ M.C.
OR REVERSE

WILL
WILL

TO 50 KENTUCKY ST
D-2A

TALKED
JAN 12-90 WITH

WILL TO CAME

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JAN 10-90

deleted from neg file

WILLSVILLE PA 17365

WILLSVILLE PA 17365

Trans 1204
Dated 12/29/89

BOYS LIFE TERM BEGINS ENDS
12 03/90 02/91

REGISTRATION INFORMATION	QTY	FEE (.)
UNIT CHARTER FEE		\$ 20.00
PD YOUTH	15	\$ 105.00
MULTIPLE YOUTH	2	XXXXXXXX
PD YOUTH W/L SUBS	13	\$ 35.80
PD ADULTS	10	\$ 70.00
MULTIPLE ADULTS	3	XXXXXXXX
PD ADULT W/L SUBS	52	\$ 13.20
TOTAL FEES SUBMITTED		\$ 274.00

EXECUTIVE OFFICER CERTIFICATION
OUR ORGANIZATION APPROVES THIS APPLICATION AND ALL HEREBY REGISTERING ADULTS. I UNDERSTAND RESPONSIBILITY FOR THE APPROVAL OF NEW ADULTS CAN BE GIVEN TO OUR CHARTERED ORGANIZATION REPRESENTATIVE. (COMPLETE INFORMATION IS ON INSTRUCTION SHEET NO. 2A-420.)

COUNCIL REPRESENTATIVE CERTIFICATION

360 MONTHS COMPLETED TENURE HANDICAPPED CHILD YES NO BOYS LIFE? YES TRAINED LEADER YES

R	POS	NAME	ADULT MEMBER LISTING	CITY	STATE	ZIP	SEX	PHONE
	OR		ADULT'S				BIRTH	
7140	Y OR	ARNOLD E	HENRY	WILLSVILLE	PA	17358	09/00	M
7144	Y OR	HELEN A	HILL	WEST GREEN	PA	17310	00/00	M
9451	CR	CHARLES E	DEASLEY	WILLSVILLE	PA	17365	09/00	M
1216	CC	ALLEN E	HOFFMAN	WILLSBURG	PA	17019	06/51	M
5344	MC	JO E	HOFFMAN	WILLSBURG	PA	17019	01/52	F

NE TROOP 5-0146 CHARTER RENEWAL CITY WELLSVILLE STATE PA

COUNTY YORK DISTRICT NAME AND NUMBER LOCAL UNIT NO. STATUS TERM (MONTHS) RENEWAL DATE
 YORK IMPERIAL 1 0146 R 12 12/89

CHARTERING ORGANIZATION NAME & ADDRESS CODE EXECUTIVE OFFICER NAME, PHONE, ADDR
 WELLSVILLE FIRE CO 169 GERALD B MYERS
 WELLSVILLE PA 17365 BOX 61 WELLSVILLE PA 17365

Transmittal 103
Dated 1/18/89

BOYS LIFE: TERM BEGINS ENDS
 12 03/89 02/90

EXECUTIVE OFFICER CERTIFICATION

Gerald B Myers

COUNCIL REPRESENTATIVE CERTIFICATION

F. J. Kiser

REGISTRATION INFORMATION	QTY	FEE
UNIT CHARTER FEE		\$ 20.00
PD YOUTH	<u>15</u>	\$ <u>105.00</u>
MULTIPLE YOUTH	---	XXXXXX
PD YOUTH B/L SUBS	<u>13</u>	\$ <u>41.00</u>
PD ADULTS	<u>12</u>	\$ <u>84.00</u>
MULTIPLE ADULTS	---	XXXXXX
PD ADULT B/L SUBS	<u>3</u>	\$ <u>19.50</u>
TOTAL FEES SUBMITTED		\$ <u>214.50</u>

368 MONTHS COMPLETED TENURE HANDICAPPED CODE _____ 100% BOYS LIFE? Yes TRAINED LEADER Yes

DR NO	POS	NAME	ADULT MEMBER LISTING ADDRESS	CITY	STATE	ZIP	BIRTH	SEX	PHONE
07160	Y SC	RONALD L HENRY	[REDACTED]	ROSSVILLE	PA	17358	00/00	M	[REDACTED]
07164	Y CC	GLENN A HULL	[REDACTED]	EAST BERLIN	PA	17316	00/00	M	[REDACTED]
19851	NC	CHARLES E BEASLEY	[REDACTED]	WELLSVILLE	PA	17365	00/00	M	[REDACTED]
07146	NO	ROBERT E BILLET	[REDACTED]	EAST BERLIN	PA	17316	00/00	M	[REDACTED]
16895	N								

MS08

MEMBERSHIP SUPPORT SYSTEM
MEMBER DELETE

10/05/90
07:27:36

CNCL 544 PRG/UNIT S0146 SEQ. 019851

FIRST: CHARLES E

LAST : BEASLEY

ADDR1: [REDACTED]

ADDR2: WELLSVILLE

PA

ADDR3:

ADDR4:

ZIP: 17365

REG STATUS: R ENROLL: 0687 BIRTH: 0000 SEX: M AGENCY: M ADULT/YOUTH: A

POSITION: CR FINDERCODE: 01 PHONE: [REDACTED]

BULK: MAG-STATUS:

REN DAT: 1290

TRANSFER FROM = CNCL:

PGM/UNIT:

SEQ:

TRANSFER DATE:

MAGAZINES

TYPE	CNCL	P/UNT	CODE	TRM	DATE	FIRST	LAST	ORIG	TOTAL	COUNT	AREAR	LAST LABEL	EXP
S			N	06	0390	0390	1190	01	001	00		2909	0191

PF2>DELETE PF12>MENU CLR>END

MEMBER DELETED FROM DATABASE SUCCESSFULLY