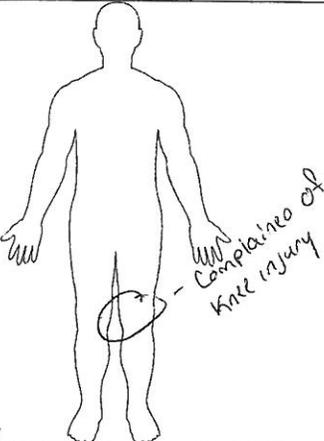
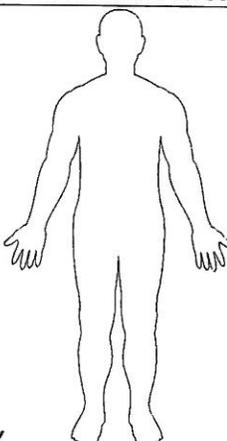
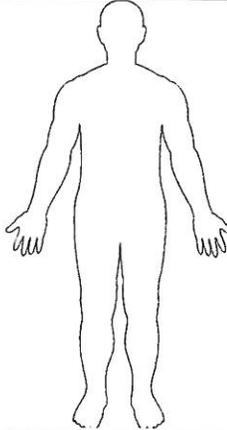
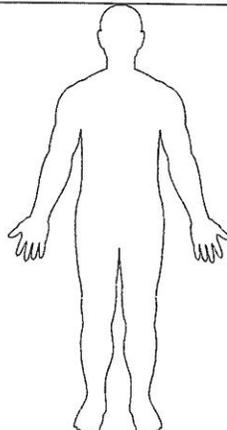


Response to Resistance Report

Key West Police Department

Case No: 15-5023

1. A Response to Resistance Report will be completed by the supervisor for: (Check all that apply)				
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A response through the use of non-lethal weapons, Applies weaponless physical force of strikes, kicks, or "take-downs" When any person sustains an apparent substantial or fatal injury as a result of the application of force When any person complains of injury as a result of the application of force Discharge of firearm in the line of duty off-duty or on-duty (other than for training, maintenance or ballistics testing)			
INCIDENT	2. Date: 11/07/15		3. Time: 0026	
	4. Location: 1075 Duval St.		5. Incident type: OBSTRUCTION	
	6. Resistance Level	7. Explanation	8. Response Option	9. Explanation
	<input checked="" type="checkbox"/> Passive: <input checked="" type="checkbox"/> Active: <input type="checkbox"/> Aggressive: <input type="checkbox"/> Deadly Force:	Non compliance Tensing	<input checked="" type="checkbox"/> Physical Control <input type="checkbox"/> Non-lethal Weapon <input type="checkbox"/> Deadly Force	Take-Down
SUBJECT	10. Last Name: FUNNEY		11. First: WILLIAM	
	12. Race: B		13. Sex: M	
	14. DOB: 03/01/1967		15. Height: 5'09	
	16. Weight: 140		17. Did you observe the subject: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
	If NO, explain why in Section 42. If "YES", complete sections 18-22			
	18. Appeared to be: <input checked="" type="checkbox"/> Intoxicated <input type="checkbox"/> Under the influence of controlled substance <input type="checkbox"/> Emotionally / mentally disturbed			
	19. Injuries: <input type="checkbox"/> No <input type="checkbox"/> Evident <input checked="" type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 22)			
20. Photographed: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes 21. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital <input type="checkbox"/> Detention				
22. Anterior View		Posterior View		
				
OFFICER	23. Officer: ANTONIO ANE		24. Race : A	
	25. Sex: M		26. Age: 25	
	27. Height : 5'08		28. Weight: 150	
	29. Duty Status: <input checked="" type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment <input checked="" type="checkbox"/> Uniformed <input type="checkbox"/> Plain clothes			
	30. Yrs Exp: 4			
31. Injuries: <input checked="" type="checkbox"/> No <input type="checkbox"/> Evident <input type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 35)				
32. Photographed: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes 33. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital				
34. Response option used by this officer: Take-Down				
35. Anterior View		Posterior View		
				

Response to Resistance Report (continued)

Key West Police Department

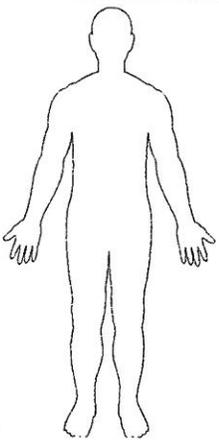
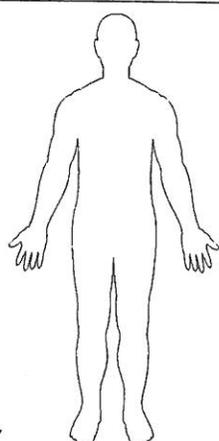
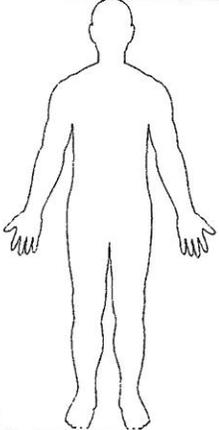
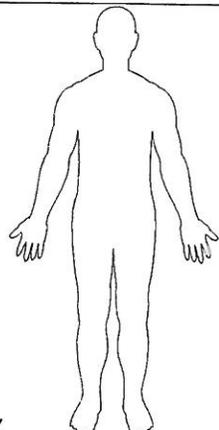
Case No: 15-5023

TASER USE ONLY	36. TASER® device serial#		37. TASER® device serial #		
	TASER@Cam serial #		TASER@Cam serial #		
	Cartridge 1 serial#		Cartridge 1 serial #		
	Cartridge 2 serial #		Cartridge 2 serial #		
	Number of cycles:		Number of cycles:		
	Type of contact: <input type="checkbox"/> Probe <input type="checkbox"/> CODS <input type="checkbox"/> Drive Stun		Type of contact: <input type="checkbox"/> Probe <input type="checkbox"/> CODS <input type="checkbox"/> Drive Stun		
	Did probes penetrate skin: <input type="checkbox"/> Yes <input type="checkbox"/> No		Did probes penetrate skin: <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Target distance at probe launch:		Target distance at probe launch:		
	Distance between probes:		Distance between probes:		
	Probes removed by (name):		Probes removed by (name):		
	Device downloaded by:		Device downloaded by:		
	<input type="checkbox"/> 38. Check and list any additional TASER® devices, cartridges or details in the incident description section.				
REPORT	39. Offense/Incident Report and/or Warrant Affidavit must include:				
	<input checked="" type="checkbox"/> All necessary criminal elements. <input checked="" type="checkbox"/> All details of the arrest <input checked="" type="checkbox"/> Details articulating the subject's words, mannerisms and actions that justify the use of force. <input checked="" type="checkbox"/> Details outlining the response to resistance utilized by each officer. <input checked="" type="checkbox"/> Detailed description of injury complaints and/or observed injuries <input checked="" type="checkbox"/> Details outlining the decontamination, first aid or medical treatment provided to the officer and/or subject.				
SUPERVISOR'S INQUIRY	40. Notified Date: 11/07/15		41. Time: 0045		
	42. Did you respond to the scene: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	43. Did you meet with the Officer: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	44. Were you able to locate any independent witnesses: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "Yes," list below)				
	Name		Address		Phone Number
	ANNETTIA BROWN		205 JULIA STREET, KEY WEST, FL. 33040		
45. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS		Sgt Matthew Haley 2807 <i>Matthew Haley</i>		11/07/15	
		46. Preparing Supervisor's Signature / ID		47. Date	
INT. AFF.	48. Did the review of this incident conclude that use of force was in compliance with Departmental policy? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", complete section 51)				
			Sgt. R. Smith 8235 <i>R. Smith</i>		
			49. Signature of Internal Affairs Inspector		50. Date 11/10/15
51. If section 48 is "No" record the Professional Standards Control Number:				52. Date Entered:	

Response to Resistance Report (continued)

Key West Police Department

Case No: 15-5023

OFFICER	23. Officer: _____ 24. Race: _____ 25. Sex: _____ 26. Age: _____ Height: _____ Weight: _____	
	29. Duty Status: <input type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment <input type="checkbox"/> Uniformed <input type="checkbox"/> Plain 30. Yrs Exp: _____	
	31. Injuries: <input type="checkbox"/> No <input type="checkbox"/> Evident <input type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 35)	
	32. Photographed: <input type="checkbox"/> No <input type="checkbox"/> Yes 33. Treated: <input type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital	
	34. Response option used by this officer: _____	
 <p>35. Anterior View</p>	 <p>Posterior View</p>	
OFFICER	23. Officer: _____ 24. Race: _____ 25. Sex: _____ 26. Age: _____ 27. Height: _____ 28. Weight: _____	
	29. Duty Status: <input type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment <input type="checkbox"/> Uniformed <input type="checkbox"/> Plain 30. Yrs Exp: _____	
	31. Injuries: <input type="checkbox"/> No <input type="checkbox"/> Evident <input type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 35)	
	32. Photographed: <input type="checkbox"/> No <input type="checkbox"/> Yes 33. Treated: <input type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital	
	34. Response option used by this officer: (If TASER®, also reference line number from TASER® section) _____	
 <p>35. Anterior View</p>	 <p>Posterior View</p>	

Key West Police Department

Report 11/07/2015 01:11

Incident Report

Case # 01-15-005023

I N C I D E N T	Case # 01-15-005023	Report 11/07/2015 01:11	Occurred From 11/07/2015 00:26	Occurred To 11/07/2015 01:00	Report Type Original
	Dept. Classification OBSTRUCT/RESIST OFFENSE		Case Status OTHER	Case Status Date 11/07/2015	Cleared 11/07/2015 00:29
	Common Name 1075 DUVAL ST KEYWEST, FL 33040 (MONROE County)				
	Day of Week : SATURDAY		Beat Assignment : 1		
	Dispatched : 11/07/2015 00:26		Alcohol Related : No		
Responded : 11/07/2015 00:26		Drug Related : No			
Arrived : 11/07/2015 00:26		Total Damaged Property Value : \$0.00			
Map Reference : 1162XX6XO		Total Stolen Property Value : \$0.00			
Location Type : HIGHWAY/ROADWAY		Total Recovered Property Value : \$0.00			

O F F E N S E 1	State Classification			Attempted/Committed COMMITTED
	Statute/Ordinance		Location Type HIGHWAY/ROADWAY	Disposition Date
	Federal Classification : RESIST OFFICER OBSTRUCT WO VIOLENCE-843.02		Evidence Collected : Yes	
	State of Florida (VICT,Primary Role); William Funney (SUSP,Primary Role) Computer Theft : Not Applicable		State Disposition : ADULT/ADULT+JUVENILES	
End of Offense: 1				

P E R S O N 1	Person Type SUSPECT/ARRESTEE	Business/Person Name William Funney			Business Phone
	Home Phone (305) 587-1066	Person Address 2002 SEIDENBERG AV KEY WEST FL 33040 ,MONROE County			
	Other Phone	Employer Address			
	Race BLACK	Sex Male	SSN	DL Exp. Date	DL Number F500-930-67-081-0
	Birth Date 03/01/1967	Birth Place			
	Age : 48		Hair Length : SHORT		
	Occupation : Sanitation Worker		Facial Hair : GOTEE		
DL State : FL		Eye Color : BROWN			
DL Country : UNITED STATES		Build : LIGHT			
Ethnic Origin : NON-HISPANIC		Complexion : DARK			
Min. Height : 5'9 "		Glasses : No			
Min. Weight : 140 lbs		Speech : NORMAL			
Adult/Juvenile : ADULT		Residency Type : CITY			
Relationship : CHILD OF William Smith, UNDETERMINED OF State of Florida		Residency Status : FULL YEAR			
Shirt : Blue tee		Citizenship : UNITED STATES			
Pants : Jean shorts		Body Marks:			
Hair Color : BLACK					
End of Person: 1					

P E R S O N 2	Person Type RELEASE TO	Business/Person Name William J. Smith			Business Phone
	Home Phone (305) 896-2346	Person Address 2002 SEIDENBERG KEY WEST FL 33040 ,MONROE County			
	Other Phone	Employer Address			
	Race BLACK	Sex Male	SSN	DL Exp. Date	DL Number S530-930-86-083-0
	Birth Date	Birth Place			

Reporting Officer ANTONIO AVRELIO ANE (3418)	Department KEY WEST POLICE DEPARTMENT	Report Status: Approved
Supervising Officer		Date/Time
Verifying Officer SGT MATTHEW HALEY (2807)	Department KEY WEST POLICE DEPARTMENT	Date / Time 11/07/2015 05:22

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Key West Police Department

Report 11/07/2015 01:11

Incident Report

Case # 01-15-005023

03/01/1986	Age : 29 DL State : FL DL Country : UNITED STATES Ethnic Origin : NON-HISPANIC Min. Height : 5'3 " Min. Weight : 120 lbs Adult/Juvenile : ADULT Relationship : PARENT/STEP PARENT OF William Funney, UNDETERMINED OF State of Florida Shirt : Black tee shirt Pants : Jeans Hair Color : BLACK	Hair Length : SHORT Facial Hair : GOTEE Eye Color : BROWN Build : LIGHT Complexion : DARK Speech : NORMAL Residency Type : CITY Residency Status : FULL YEAR Citizenship : UNITED STATES Body Marks:
End of Person: 2		

P E R S O N 3	Person Type	Business/Person Name			Business Phone
	VICTIM	State of Florida			
	Home Phone	Person Address			
	Other Phone	Employer Address			
	Race	Sex	SSN	DL Exp. Date	DL Number
	Birth Date	Birth Place			
	Relationship : OTHER OF William Funney, OTHER OF William Smith		Body Marks:		
Victim Type : GOVERNMENT					
End of Person: 3					

N A R R A T I V E 1	Topic	ORIGINAL
	<p>On Saturday, November 7, 2015 at approximately 0026 hours, I, Ofc. Ane, was on patrol in the area of Circle K, located at 1075 Duval St., when I saw a black male, with a thin build and goatee. This description matches that of Rashad Lajuan McCray. Rashad has an active warrant from the Key West Police Department's SIU.</p>	
	<p>I parked my marked patrol vehicle in front of the male and introduced myself as Officer Ane with the Key West Police Department. I asked the male for identification. He refused and asked me why I wanted to see his identification. I told him I believed he may have a warrant, I did not know who he was and I needed to verify that he was not wanted. While I was speaking to the male, I saw several empty beer cans next to him on a concrete wall. I could smell an odor of an alcoholic beverage emanating from his breath.</p>	
	<p>He became agitated and again refused to provide his information. His evasive and argumentative behavior only raised my suspicion and belief he was Rashad Lajuan McCray. I told the male, who was later identified as William Funney, I would detain him, until I could verify his identity.</p>	
<p>I grabbed William's right arm and he immediately tensed his arm and began to pull it towards himself. I gave William a loud verbal command to stop resisting and put his arms behind his back. He attempted to pull his body away from me, when I was able to underhook his right arm and place his right arm behind his back. William continued to tense his body and pull away from me. I pivoted off of my right foot and began to go down to my right knee. As I was going down to my knee, William attempted to</p>		

Reporting Officer	Department	Report Status:
ANTONIO AVRELIO ANE (3418)	KEY WEST POLICE DEPARTMENT	Approved
Supervising Officer		Date/Time
Verifying Officer	Department	Date / Time
SGT MATTHEW HALEY (2807)	KEY WEST POLICE DEPARTMENT	11/07/2015 05:22

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Key West Police Department

Report 11/07/2015 01:11

Incident Report

Case # 01-15-005023

stand. I gave William several commands to stop fighting me and go down to the ground. William responded, saying he was going to stand several times. I was able to place William on his stomach and place both of his arms behind his back. I placed William in handcuffs (double-locked).

Once in handcuffs, William told me he was William Funney and provided his birth date. William became more cooperative and provided his Florida's driver's license. I ran William's driver's license, which returned negative for any wants or warrants.

Several of William's family members approached me, while I was on scene. William's son, William J. Smith, explained his father had been drinking heavily at a family party. His father walked out of the party and William Smith and his cousin were out looking for him.

I asked Sgt. M. Haley to respond to our location to document my take down and encounter with William. Sgt. M. Haley completed a Response to Resistance Report.

I spoke to William, who apologized for being combative and explained he did not know he was required to provide identification. After considering the facts and circumstances of this investigation, Sgt. Haley and I decided to use discretion when concluding this investigation.

I released William to William Smith, who ensured he would be taking his father home for the rest of the night.

This investigation was recorded via my department issue body worn camera. I later uploaded the video to the COBAN server.

No further action.

End of Narrative: 1

Reporting Officer ANTONIO AVRELIO ANE (3418)	Department KEY WEST POLICE DEPARTMENT	Report Status: Approved
Supervising Officer		Date/Time
Verifying Officer SGT MATTHEW HALEY (2807)	Department KEY WEST POLICE DEPARTMENT	Date / Time 11/07/2015 05:22

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