

# Response to Resistance Report

Key West Police Department

Case No: 14-5738

**1. A Response to Resistance Report will be completed by the supervisor for: (Check all that apply)**

- 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)

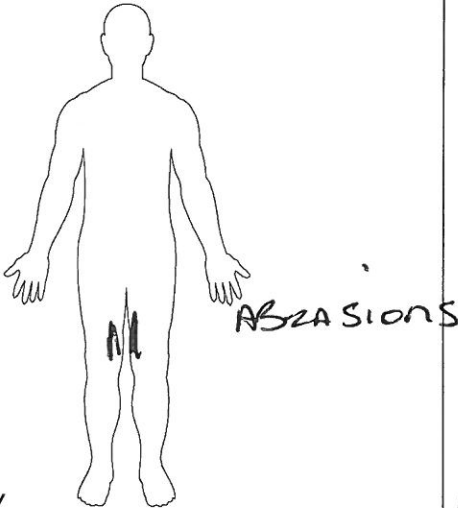
**2. Date:** 02DEC2014      **3. Time:** 1946      **4. Location:** 3330 Northside Dr      **5. Incident type:** 1<sup>st</sup> Aid Assist

6. Resistance Level	7. Explanation	8. Response Option	9. Explanation
<input checked="" type="checkbox"/> Passive:	Non-compliance	<input checked="" type="checkbox"/> Physical Control	Leg sweep
<input checked="" type="checkbox"/> Active:	Tensing, jerking, pulling away	<input type="checkbox"/> Non-lethal Weapon	
<input type="checkbox"/> Aggressive:		<input type="checkbox"/> Deadly Force	
<input type="checkbox"/> Deadly Force:			

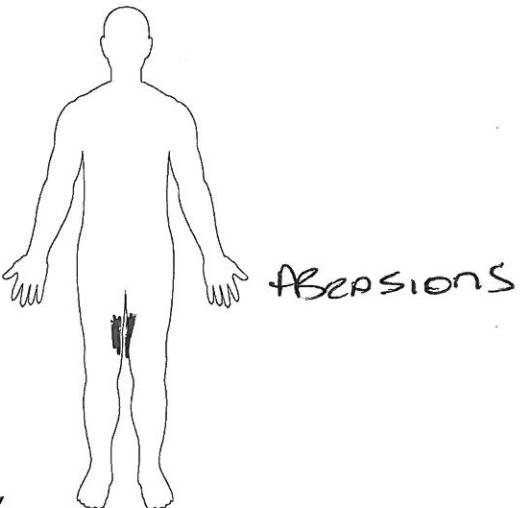
**10. Description of Incident: (If additional space is needed, continue in section 51 or use separate page if needed)**  
 Officers responded to a first aid assist regarding a mother who had phoned 911 advising that her son (VENTA) had ingested some type of narcotic and was acting strange. When Officers arrived, VENTA was walking in his boxer shorts at the front of the apartment complex and appeared to be totally disoriented. Ofc. Curruel told VENTA to sit down which VENTA ignored (passive) and then Ofc. Young told VENTA to sit down also. VENTA again disregarded (passive) and because of his demeanor (10000 yard stare; speaking gibberish) and his non-compliance he was handcuffed to prevent injury to either himself or the officers. Once he was placed into handcuffs, VENTA began to tense and jerk and almost broke free of the officers grasp trying to get away (active) Ofc. Young then used a "leg-sweep" on VENTA which caused VENTA to lose balance and fall onto his buttocks area. VENTA still was tensing, jerking and attempting to pull away (active) and in the process Ofc. Young also went to one knee injuring same (scrape and contusion). During this, both officers were engaged in trying to restrain VENTA. Ofc. Young radioed that they needed more units and they had one, "on the ground." Ofc. Diaz and Nelson responded

**11. Last Name:** Venta,      **12. First:** Lazaro      **13. Race:** H      **14. Sex:** M  
**15. DOB:** 01MAY1995      **16. Height:** 6'0"      **17. Weight:** 200  
**18. Did you observe the subject:**  No  Yes      If NO, explain why in Section 5. If "YES", complete sections 19-23  
**19. Appeared to be:**  Intoxicated  Under the influence of controlled substance  Emotionally / mentally disturbed  
**20. Injuries:**  No  Evident  Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 23 )  
**21. Photographed:**  No  Yes      **22. Treated:**  No  Yes      **By:**  EMT/Paramedic on scene  Hospital  Detention

**SUBJECT**



23. Anterior View

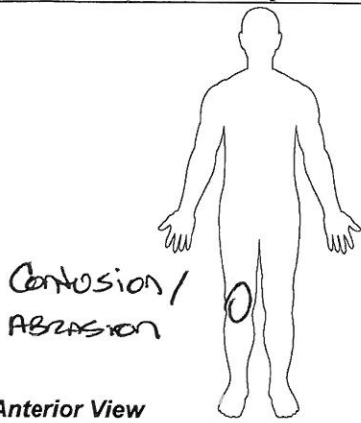
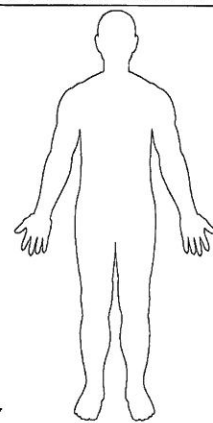
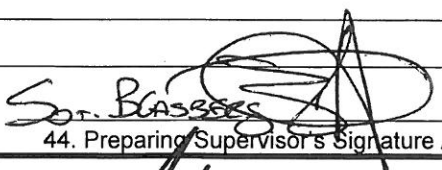
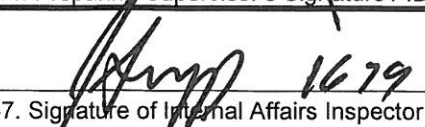


Posterior View

# Response to Resistance Report (continued)

Key West Police Department

Case No: 14-5738

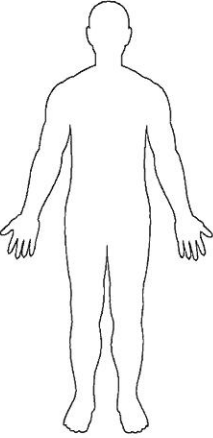
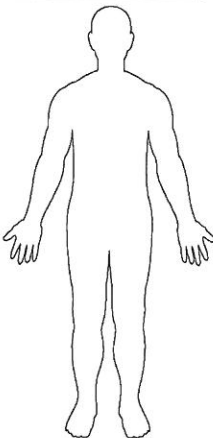
<b>OFFICER</b>	24. Officer: Young, J		25. Race: W		26. Sex: M		27. Age: 33		
	28. Duty Status: <input checked="" type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment		<input checked="" type="checkbox"/> Uniformed <input type="checkbox"/> Plain clothes		29. Yrs Exp: 10+				
	30. Injuries: <input type="checkbox"/> No <input checked="" type="checkbox"/> Evident <input type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 33)								
	31. Photographed: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		32. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital				
33. Response option used by this officer: (If TASER®, also reference line number from TASER® section) Leg Sweep									
									
34. Anterior View					34. Posterior View				
<b>TASER USE ONLY</b>	35. TASER® device serial #				36. 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"/> 37. Check and list any additional TASER® devices, cartridges or details in the incident description section.									
<b>SUPERVISOR'S INQUIRY</b>	38. Notified Date: 2DEC2014				39. Time: 2001				
	40. Did you respond to the scene: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "No", explain why in section 10)								
	41. Did you meet with the Officer: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why in section 10)								
	42. 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			
Maria Pellon		3330 Northside #412 Key West FL 33040			3056190602				
43. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes									
FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS						1508		2 DEC 14	
				44. Preparing Supervisor's Signature / ID		45. Date			
<b>INT. AFF.</b>	46. 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 49)						1679		12/8/14
					47. Signature of Internal Affairs Inspector		48. Date		
49. If section 46 is "No" record the Professional Standards Control Number:						50. Date Entered:			

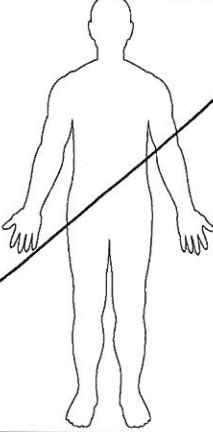
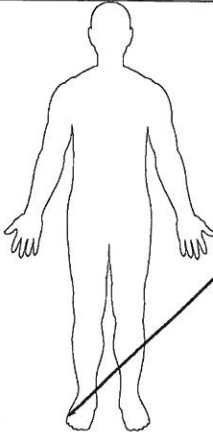
**Response to Resistance Report (continued)**

Key West Police Department

Case No: 14-5738

INCIDENT	<p><b>51. Description (Section 10 continued)</b> VENTA was secured until CARE arrived at which point VENTA was placed on a backboard and hurriedly transported to the ER. VENTA received some minor scrapes (photographed) during his resistance with the officers but was otherwise not injured. He was remanded to the ER since he had ingested LSD. Ofc. Young's injury was photographed and he declined further medical treatment as of this report date (N.O.I. completed). Ofc. Currul was not injured.</p> <p>I was unable to respond to the scene for two reasons: First, I was off the air at "Wellness" (see CAD sheet) and secondly, because of VENTA'S mental and physical state VENTA needed to be evaluated/treated at the ER as soon as possible. I responded to the ER once I was notified</p> <p>Attachments; CD, report copies, witness statement copy and CAD copies</p>
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OFFICER	<p><b>24. Officer:</b> Currul, R <b>25. Race:</b> W <b>26. Sex:</b> M <b>27. Age:</b> 42</p>	
	<p><b>28. Duty Status:</b> <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 <b>29. Yrs Exp:</b> 18+</p>	
	<p><b>30. Injuries:</b> <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 34 )</p>	
	<p><b>31. Photographed:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>32. Treated:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>By:</b> <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital</p>	
	<p><b>33. Response option used by this officer: (If TASER®, also reference line number from TASER® section) Restraints</b></p>	
	 <p><b>34. Anterior View</b></p>	 <p><b>Posterior View</b></p>

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

# Response to Resistance Report

Key West Police Department

Case No: \_\_\_\_\_

14-5882 <sup>13</sup>

**1. A Response to Resistance Report will be completed by the supervisor for: (Check all that apply)**

- 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)

**2. Date:** 12/11/14      **3. Time:** 0415      **4. Location:** Simonton/Greene Sts      **5. Incident type:** Warrant Arrest

**6. Resistance Level**      **7. Explanation**      **8. Response Option**      **9. Explanation**

- |   |              |  |            |
|---|--------------|--|------------|
| <input type="checkbox"/> Passive:           | _____        | <input checked="" type="checkbox"/> Physical Control | Take Down; |
| <input checked="" type="checkbox"/> Active: | Running Away | <input type="checkbox"/> Non-lethal Weapon           | _____      |
| <input type="checkbox"/> Aggressive:        | _____        | <input type="checkbox"/> Deadly Force                | _____      |
| <input type="checkbox"/> Deadly Force:      | _____        |  |            |

INCIDENT

**10. Description of Incident: (If additional space is needed, continue in section 51 or use separate page if needed)**

On 12/11/14, at about 0415 hours, Officer A. Nelson and Officer M. Diaz, responded to a call about a man with an active warrant (Stephen Reddy). During the encounter, S. Reddy fled on foot. Officer Diaz "tackled" S.Reddy to the ground and placed him in cuffs. I was not able to respond to the scene because Officer Diaz notified me, at least 45 minutes after the incident. S. Reddy had been removed from the scene and was at Monroe County Detention Center by the time I was notified.

**11. Last Name:** Reddy      **12. First:** Stephen      **13. Race:** W      **14. Sex:** M

**15. DOB:** 12/20/1988      **16. Height:** 5'9'      **17. Weight:** 180

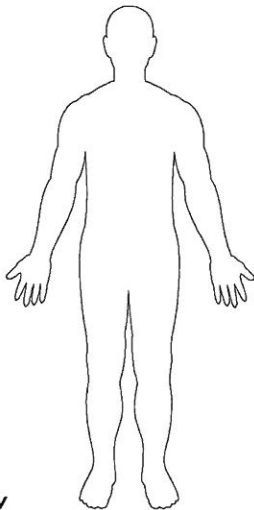
**18. Did you observe the subject:**  No  Yes      If NO, explain why in Section 5. If "YES", complete sections 19-23

**19. Appeared to be:**  Intoxicated  Under the influence of controlled substance  Emotionally / mentally disturbed

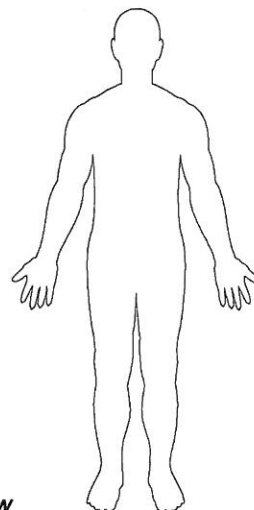
**20. Injuries:**  No  Evident  Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 23 )

**21. Photographed:**  No  Yes      **22. Treated:**  No  Yes      **By:**  EMT/Paramedic on scene  Hospital  Detention

SUBJECT



**23. Anterior View**



**Posterior View**

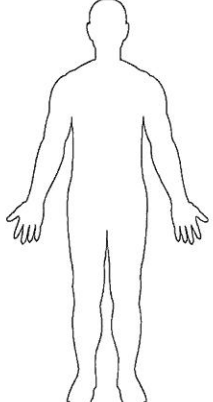
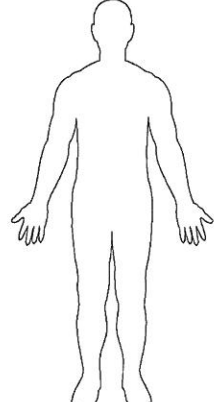
# Response to Resistance Report (continued)

Key West Police Department

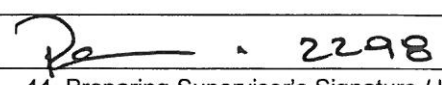
Case No: \_\_\_\_\_

14-5882-13

<b>24. Officer:</b> Michael Diaz	<b>25. Race:</b> H	<b>26. Sex:</b> M	<b>27. Age:</b> 28
<b>28. Duty Status:</b> <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			<b>29. Yrs Exp:</b> 2
<b>30. Injuries:</b> <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 33)			
<b>31. Photographed:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<b>32. Treated:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>By:</b> <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital	
<b>33. Response option used by this officer: (If TASER®, also reference line number from TASER® section) 35</b>			

OFFICER		
	<b>34. Anterior View</b>	<b>Posterior View</b>

TASER USE ONLY	<b>35. TASER® device serial #</b> TASER®Cam serial # Cartridge 1 serial # Cartridge 2 serial # Number of cycles: 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 Target distance at probe launch: Distance between probes: Probes removed by (name): Device downloaded by:	<b>36. TASER® device serial #</b> TASER®Cam serial # Cartridge 1 serial # Cartridge 2 serial # Number of cycles: 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 Target distance at probe launch: Distance between probes: Probes removed by (name): Device downloaded by:
	<input type="checkbox"/> <b>37. Check and list any additional TASER® devices, cartridges or details in the incident description section.</b>	

SUPERVISOR'S INQUIRY	<b>38. Notified Date:</b> 12/11/14	<b>39. Time:</b> 0510
	<b>40. Did you respond to the scene:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "No", explain why in section 10)	
	<b>41. Did you meet with the Officer:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why in section 10)	
	<b>42. Were you able to locate any independent witnesses:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)	
	Name	Address
		Phone Number
	<b>43. Is further review recommended:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS	
	 2298	12/11/14
	44. Preparing Supervisor's Signature / ID	45. Date

INT. AFF.	<b>46. Did the review of this incident conclude that use of force was in compliance with Departmental policy?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes (If "No", complete section 49)	 1629
	47. Signature of Internal Affairs Inspector	48. Date
	49. If section 46 is "No" record the Professional Standards Control Number:	50. Date Entered:
		12/15/14

# Response to Resistance Report

Key West Police Department

Case No: 14-5916

**1. A Response to Resistance Report will be completed by the supervisor for: (Check all that apply)**

- 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)

**2. Date:** 12/13/14      **3. Time:** 0315      **4. Location:** 500 blk Angela Street      **5. Incident type:** Battery LEO

6. Resistance Level	7. Explanation	8. Response Option	9. Explanation
<input type="checkbox"/> Passive:		<input checked="" type="checkbox"/> Physical Control	Arm-Bar Takedown
<input checked="" type="checkbox"/> Active:	Pulling Away	<input type="checkbox"/> Non-lethal Weapon	
<input checked="" type="checkbox"/> Aggressive:	Punched Officer	<input type="checkbox"/> Deadly Force	
<input type="checkbox"/> Deadly Force:			

**10. Description of Incident:** (If additional space is needed, continue in section 51 or use separate page if needed)  
 Officers responded to the 800 blk of Duval Street reference a disorderly nude female. When officers arrived she fled, climbed onto the roofs on the 700 blk of Duval Street and was acting erratic. She refused to follow officers commands to come off the roof. She then attempted to come down in a location officers weren't and jump a fence to continue to flee from officers. Ofc. Stutz was able to catch her and gave her multiple lawful verbal commands which she disregarded. When she continued to ignore Ofc. Stutz, he grabbed her wrist to subdue her at which time she punched him in the chest with a closed fist. Ofc. Stutz again gave her verbal commands to place her hands behind her back which she disobeyed and struck him again in the chest with a closed fist. As she went to strike him a third time, he did an arm bar take down on the subject. I responded to the scene as well as rescue. I met with the subject who was clearly on some type of narcotic/s. While speaking with her I did not observe any injuries to her.

**11. Last Name:** Beltrain Del Rio      **12. First:** Marisa      **13. Race:** W      **14. Sex:** F

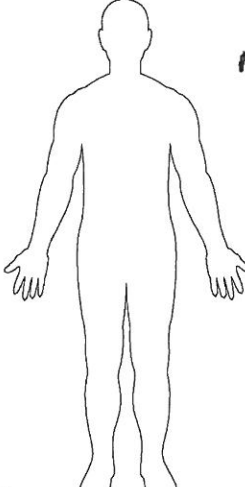
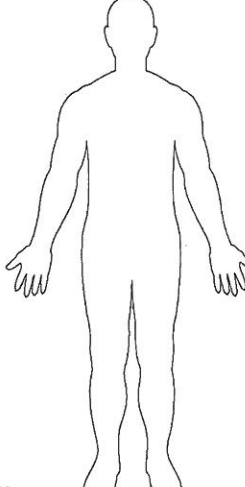
**15. DOB:** 01/11/1991      **16. Height:** 5'00"      **17. Weight:** 145

**18. Did you observe the subject:**  No  Yes      If NO, explain why in Section 5. If "YES", complete sections 19-23

**19. Appeared to be:**  Intoxicated  Under the influence of controlled substance  Emotionally / mentally disturbed

**20. Injuries:**  No  Evident  Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 23 )

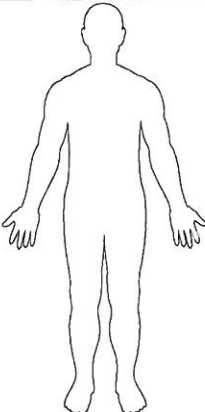
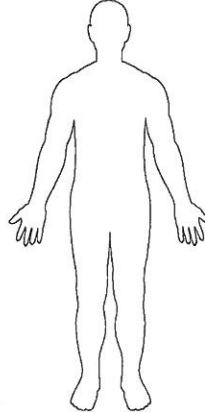
**21. Photographed:**  No  Yes      **22. Treated:**  No  Yes      **By:**  EMT/Paramedic on scene  Hospital  Detention

SUBJECT	 <p>N/A</p>	 <p>N/A</p>
	<b>23. Anterior View</b>	<b>Posterior View</b>

# Response to Resistance Report (continued)

Key West Police Department

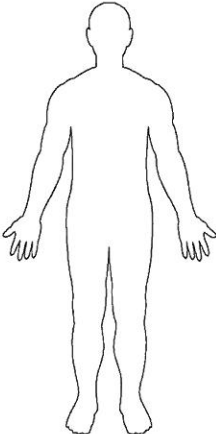
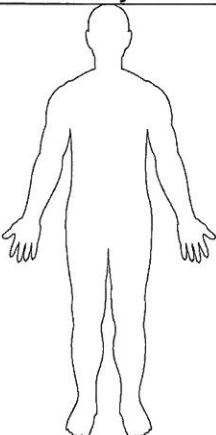
Case No: 14-5916

OFFICER	24. Officer: Thomas Stutz		25. Race: W	26. Sex: M	27. Age: 36	
	28. 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		29. Yrs Exp: 7	
	30. 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 33)					
	31. Photographed: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		32. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital			
33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)						
 <p>34. Anterior View</p>			 <p>Posterior View</p>			
TASER USE ONLY	35. TASER® device serial # N/A			36. TASER® device serial #		
	TASER®Cam serial # N/A			TASER®Cam serial #		
	Cartridge 1 serial # N/A			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"/> 37. Check and list any additional TASER® devices, cartridges or details in the incident description section.						
SUPERVISOR'S INQUIRY	38. Notified Date: 12/13/14			39. Time: 0315		
	40. Did you respond to the scene: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why in section 10)					
	41. Did you meet with the Officer: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why in section 10)					
	42. Were you able to locate any independent witnesses: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)					
	Name		Address		Phone Number	
43. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						
FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS			SGT. R. SMITH / RS 2935		12/13/14	
				44. Preparing Supervisor's Signature / ID		
				45. Date		
INT. AFF.	46. 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 49)					
	47. Signature of Internal Affairs Inspector				48. Date	
49. If section 46 is "No" record the Professional Standards Control Number:					50. Date Entered:	

# Response to Resistance Report (continued)

Key West Police Department

Case No: 14-5916

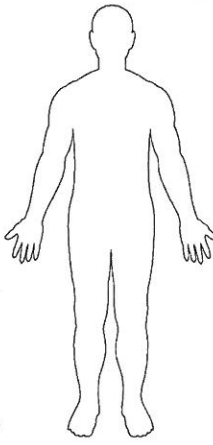
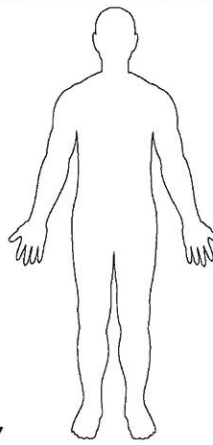
<b>INCIDENT</b>	<p><b>51. Description (Section 10 continued):</b>                  She then stated she was choked and slapped by an officer. When I asked her to identify the officer, she looked into the front seat of the vehicle she was seated in and stated it was the officer seated in the front seat. I looked into the front seat and no officer/person was seated there. I asked two additional times for her to confirm who it was, and two more times she looked into the front seat, acknowledged there was an officer seated there and that he was the one who had slapped and choked her. I did not observe any injuries on her to confirm her story. Due to her not having any injuries, being completely nude and refusing to cooperate with photos being taken, none were taken. It was later learned she was on numerous narcotics and had to be hospitalized for several hours due to this fact.</p>	
<b>OFFICER</b>	<p><b>24. Officer:</b> N/A <span style="margin-left: 150px;"><b>25. Race:</b></span> <span style="margin-left: 50px;"><b>26. Sex:</b></span> <span style="margin-left: 50px;"><b>27. Age:</b></span></p>	
	<p><b>28. Duty Status:</b> <input type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment <input type="checkbox"/> Uniformed <input type="checkbox"/> Plain clothes <span style="float: right;"><b>29. Yrs Exp:</b></span></p>	
	<p><b>30. Injuries:</b> <input type="checkbox"/> No <input type="checkbox"/> Evident <input type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 34 )</p>	
	<p><b>31. Photographed:</b> <input type="checkbox"/> No <input type="checkbox"/> Yes <b>32. Treated:</b> <input type="checkbox"/> No <input type="checkbox"/> Yes <b>By:</b> <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital</p>	
	<p><b>33. Response option used by this officer: (If TASER®, also reference line number from TASER® section) 35</b></p>	
<b>34. Anterior View</b>		<b>Posterior View</b>
<b>34. Anterior View</b>		<b>Posterior View</b>

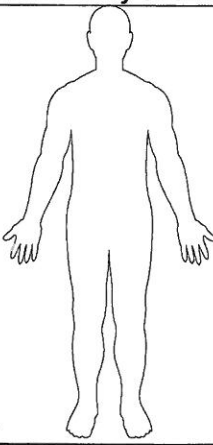
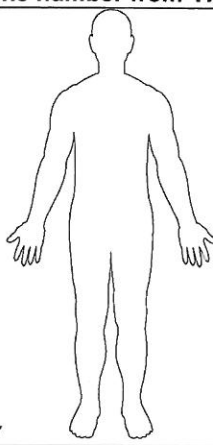
# Response to Resistance Report (continued)

Key West Police Department

Case No: 14-5916

INCIDENT	<p><b>51. Description (Section 10 continued):</b>                  My interaction with her was captured on my COBAN system and logged under the case number as she refused to give her name at that time. She was transported to LKMC only due to her erratic behavior clearly associated with narcotic use and not due to any injury from KWPD.</p>
----------	--

OFFICER	24. Officer: N/A		25. Race:	26. Sex:	27. Age:
	28. 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 clothes				29. Yrs Exp:
	30. 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 34)				
	31. Photographed: <input type="checkbox"/> No <input type="checkbox"/> Yes		32. Treated: <input type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital		
	33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)				
	<p>34. Anterior View</p> 		<p>Posterior View</p> 		

OFFICER	24. Officer: N/A		25. Race:	26. Sex:	27. Age:
	28. 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 clothes				29. Yrs Exp:
	30. 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 34)				
	31. Photographed: <input type="checkbox"/> No <input type="checkbox"/> Yes		32. Treated: <input type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital		
	33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)				
	<p>34. Anterior View</p> 		<p>Posterior View</p> 		

# Response to Resistance Report

Key West Police Department

Case No: 14-5942

**1. A Response to Resistance Report will be completed by the supervisor for: (Check all that apply)**

- 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)

**2. Date:** 12/14/14      **3. Time:** 0915hrs      **4. Location:** Southernmost Point      **5. Incident type:** Drug Arrest

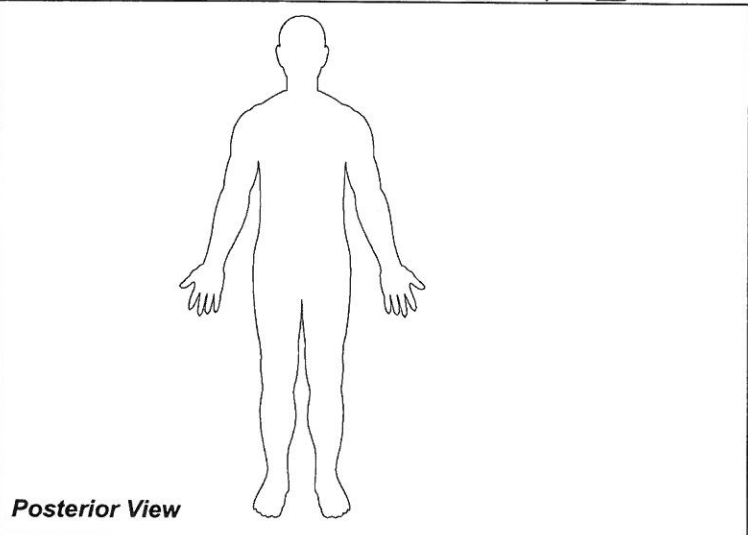
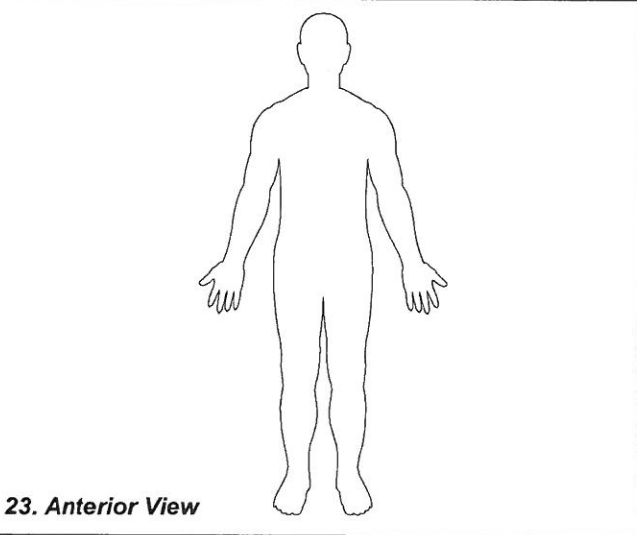
6. Resistance Level	7. Explanation	8. Response Option	9. Explanation
<input type="checkbox"/> Passive:		<input checked="" type="checkbox"/> Physical Control	Officer used a takedown to gain compliance
<input checked="" type="checkbox"/> Active:	Subject attempted to walk away and tampered with evidence	<input type="checkbox"/> Non-lethal Weapon	
<input type="checkbox"/> Aggressive:		<input type="checkbox"/> Deadly Force	
<input type="checkbox"/> Deadly Force:			

INCIDENT

**10. Description of Incident: (If additional space is needed, continue in section 51 or use separate page if needed)**  
 Officer Betz was patrolling on the 1400 block of Whitehead St/Southernmost Point and smelled burnt marijuana. Ofc. Betz saw the DEFENDANT, who was the only one in the area of the odor, and approached him. The DEFENDANT tried to quickly walk away, and Ofc. Betz observed he had something clenched in his left hand. Ofc. Betz asked him to stop but he refused. Ofc. Betz saw the DEFENDANT attempt to put something in his mouth, it appeared to be a marijuana "roach". Ofc. Betz was not able to stop him from putting the evidence in his mouth. The DEFENDANT continued to try to leave, so Ofc. Betz had to subdue the subject and take him to the ground. Post Miranda, the DEFENDANT did admit to eating/swallowing the marijuana "roach". Search incident to arrest marijuana "shake" was found in the DEFENDANTS right front pocket. The DEFENDANT did have a strong odor of marijuana on his breath and exuding from his body.

**11. Last Name:** Ramdesh      **12. First:** Gopaul      **13. Race:** other      **14. Sex:** male  
**15. DOB:** 08/22/74      **16. Height:** 5'10"      **17. Weight:** 170 to 180  
**18. Did you observe the subject:**  No  Yes      If NO, explain why in Section 5. If "YES", complete sections 19-23  
**19. Appeared to be:**  Intoxicated     Under the influence of controlled substance     Emotionally / mentally disturbed  
**20. Injuries:**  No     Evident     Alleged    (If Evident or Alleged, describe and indicate areas on charts in Section 23 )  
**21. Photographed:**  No  Yes    **22. Treated:**  No  Yes    **By:**  EMT/Paramedic on scene     Hospital     Detention

SUBJECT



# Response to Resistance Report (continued)

Key West Police Department

Case No: 14-5942

OFFICER	24. Officer: Frank Betz		25. Race: white		26. Sex: Male		27. Age: 41	
	28. 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		29. Yrs Exp: 9			
	30. 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 33)							
	31. Photographed: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		32. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital			
	33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)							
34. Anterior View				Posterior View				

TASER USE ONLY	35. TASER® device serial #				36. 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"/> 37. Check and list any additional TASER® devices, cartridges or details in the incident description section.								

SUPERVISOR'S INQUIRY	38. Notified Date: 12/14/14			39. Time: 0915		
	40. Did you respond to the scene: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why in section 10)					
	41. Did you meet with the Officer: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why in section 10)					
	42. Were you able to locate any independent witnesses: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)					
	Name		Address		Phone Number	
43. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						
FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS			Sgt. H. Wood <i>Sgt. H. Wood</i> 2091		12/14/14	
				44. Preparing Supervisor's Signature / ID		
				45. Date		

INT. AFF.	46. 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 49)			47. Signature of Internal Affairs Inspector <i>[Signature]</i> 1679		48. Date 12/15/14	
	49. If section 46 is "No" record the Professional Standards Control Number:				50. Date Entered:		

# Response to Resistance Report

Key West Police Department

Case No: 14-6244

**1. A Response to Resistance Report will be completed by the supervisor for: (Check all that apply)**

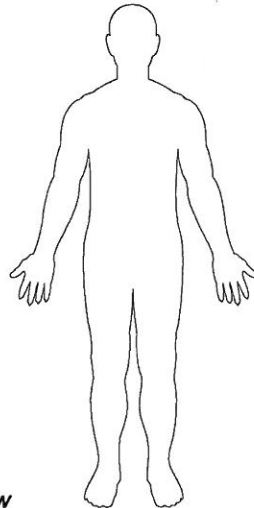
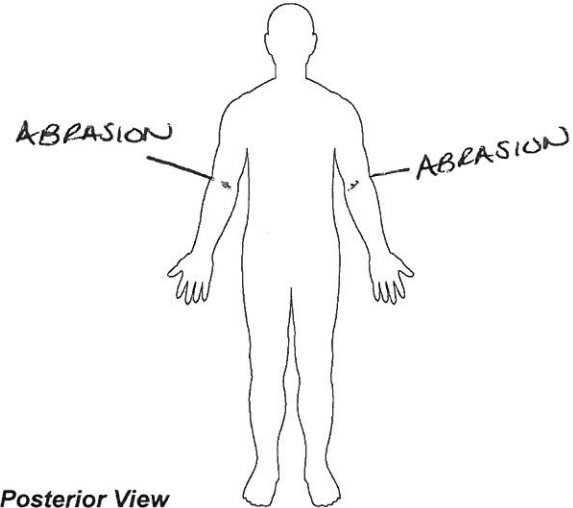
- A response through the use of non-lethal weapons,
- Applies weaponless physical force of strikes, kicks, or "take-downs"
- When any person sustains an apparent substantial or fatal injury as a result of the application of force
- When any person complains of injury as a result of the application of force
- Discharge of firearm in the line of duty off-duty or on-duty (other than for training, maintenance or ballistics testing)

**2. Date:** 12/31/14      **3. Time:** 2330      **4. Location:** 506 Southard Street      **5. Incident type:** Resisting Arrest

6. Resistance Level	7. Explanation	8. Response Option	9. Explanation
<input type="checkbox"/> Passive:	_____	<input checked="" type="checkbox"/> Physical Control	Take Down
<input checked="" type="checkbox"/> Active:	Pulling/Pushing	<input type="checkbox"/> Non-lethal Weapon	_____
<input type="checkbox"/> Aggressive:	_____	<input type="checkbox"/> Deadly Force	_____
<input type="checkbox"/> Deadly Force:	_____		

**10. Description of Incident: (If additional space is needed, continue in section 51 or use separate page if needed)**  
 Sgt. Smith was working the New Year's Eve event. As he was walking on Southard Street, he observed two male subjects arguing. Sgt. Smith spoke with the males, one of whom (Spatafora) was sober and acting as a responsible for the other. The other male (Leigh) was intoxicated and belligerent and told Sgt. Smith to, "Go fuck" himself. Sgt. Smith tried to get Leigh to go home with his responsible friend, Spatafora. Leigh continued to refuse and tried to walk back into the crowd. Sgt. Smith placed his hand out to stop Leigh, at which time Leigh slapped Sgt. Smith's hand away and continued toward him. Sgt. Smith advised Leigh he was not free to leave and he was under arrest. Leigh dared Sgt. Smith to attempt to place handcuffs on him. Sgt. Smith told Leigh to place his hands behind his back, which Leigh complied with. As Sgt. Smith attempted to handcuff Leigh, Leigh pulled away and tried to flee. Sgt. Smith grabbed Leigh around the upper shoulders as he tried to flee and took him to the ground.

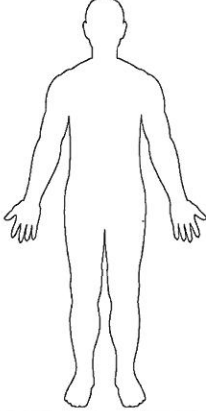
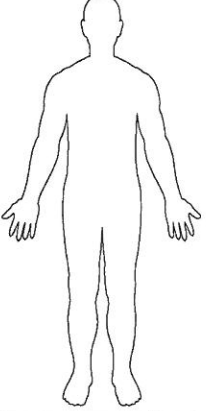
**11. Last Name:** Leigh      **12. First:** Michael      **13. Race:** W      **14. Sex:** M  
**15. DOB:** 10/15/1966      **16. Height:** 5'07"      **17. Weight:** 165  
**18. Did you observe the subject:**  No  Yes      If NO, explain why in Section 5. If "YES", complete sections 19-23  
**19. Appeared to be:**  Intoxicated     Under the influence of controlled substance     Emotionally / mentally disturbed  
**20. Injuries:**  No  Evident     Alleged    (If Evident or Alleged, describe and indicate areas on charts in Section 23 )  
**21. Photographed:**  No  Yes    **22. Treated:**  No  Yes    **By:**  EMT/Paramedic on scene     Hospital     Detention

SUBJECT	 <b>23. Anterior View</b>	 <b>Posterior View</b>
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# Response to Resistance Report (continued)

Key West Police Department

Case No: 14-6244

<b>OFFICER</b>	24. Officer: Randall Smith		25. Race: W	26. Sex: M	27. Age: 35
	28. 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		29. Yrs Exp: 9
	30. 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 33)				
	31. Photographed: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		32. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital		
	33. Response option used by this officer: (If TASER®, also reference line number from TASER® section) Take Down				
<b>OFFICER</b>					
	34. Anterior View		Posterior View		
<b>TASER USE ONLY</b>	35. TASER® device serial # N/A		36. TASER® device serial # N/A		
	TASER®Cam serial # N/A		TASER®Cam serial #		
	Cartridge 1 serial # N/A		Cartridge 1 serial #		
	Cartridge 2 serial # N/A		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"/> 37. Check and list any additional TASER® devices, cartridges or details in the incident description section.					
<b>SUPERVISOR'S INQUIRY</b>	38. Notified Date: 12/31/14		39. Time: 2335		
	40. Did you respond to the scene: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why in section 10)				
	41. Did you meet with the Officer: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why in section 10)				
	42. 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	
Nicholas Spatafora		8501 NW 21 <sup>st</sup> Court, Sunrise, FL 33322		571-277-8124	
43. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Lt. Anaraka Jewell 2016		12/31/14	
FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS		44. Preparing Supervisor's Signature / ID		45. Date	
<b>INT. AFF.</b>	46. 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 49)		47. Signature of Internal Affairs Inspector		
			1629		
49. If section 46 is "No" record the Professional Standards Control Number:		50. Date Entered: 1/5/18			



# Response to Resistance Report (continued)

Key West Police Department

Case No: 14-6244

**INCIDENT**

**51. Description (Section 10 continued):**  
 to await other officers to arrive. Shortly after moving his arm into that position, Leigh gave up and placed his left hand behind his back and was placed in custody. Other officers arrived and assisted getting Leigh to his feet and holding him at Sgt. Smith's patrol car while awaiting the transport van. Leigh continued to resist, by trying to pull away from officers and refusing their commands. Sgt. Smith took photographs of Leigh and noted he had minor abrasions to his elbows from the struggle. There were no other injuries advised or visible. I spoke with Spatafora who witnessed the event and completed a sworn written statement.

**OFFICER**

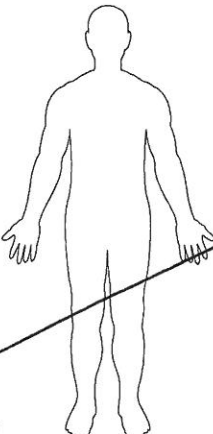
**24. Officer:** \_\_\_\_\_ **25. Race:** \_\_\_\_\_ **26. Sex:** \_\_\_\_\_ **27. Age:** \_\_\_\_\_

**28. Duty Status:**  On-duty  Off-duty  Extra duty employment  Uniformed  Plain clothes **29. Yrs Exp:** \_\_\_\_\_

**30. Injuries:**  No  Evident  Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 34.)

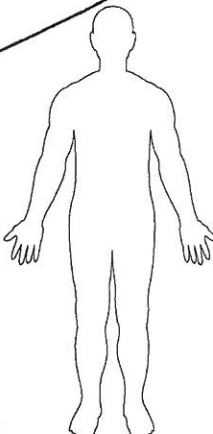
**31. Photographed:**  No  Yes **32. Treated:**  No  Yes **By:**  EMT/Paramedic on scene  Hospital

**33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)**



34. Anterior View

NA



Posterior View

**OFFICER**

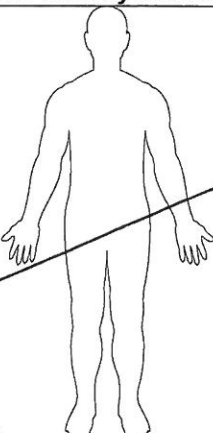
**24. Officer:** \_\_\_\_\_ **25. Race:** \_\_\_\_\_ **26. Sex:** \_\_\_\_\_ **27. Age:** \_\_\_\_\_

**28. Duty Status:**  On-duty  Off-duty  Extra duty employment  Uniformed  Plain clothes **29. Yrs Exp:** \_\_\_\_\_

**30. Injuries:**  No  Evident  Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 34.)

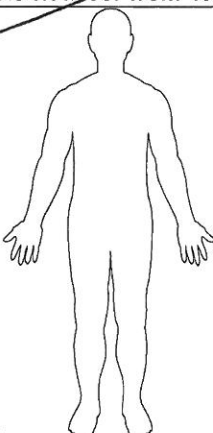
**31. Photographed:**  No  Yes **32. Treated:**  No  Yes **By:**  EMT/Paramedic on scene  Hospital

**33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)**



34. Anterior View

NA



Posterior View