

I. CRB Control #

14-002

COMPLAINT FORM

Citizen Review Board

PO Box 1946, Key West, FL 33041

<http://www.keywestcity.com>

email: crb@keywestcity.com

(305) 809-3887 Fax (305) 293-9827

2. Day, Date, Time
Complaint Received

July 23, 2014
10:45 AM

3. KWPD Control System #

Please provide as much information as you can about the incident(s). Use additional pages if necessary.

Suministre la mayor cantidad de información posible acerca del (de los) incidente(s). Utilice páginas adicionales si fuese necesario

A. COMPLAINANT INFORMATION

DATOS DEL DENUNCIANTE

Name: Marie Kertonne Annulyse Date of Birth: 08/27/1987
Nombre Fecha de nacimiento

Address: 320 Angela AA 5A Keywest FL 33040
(Dirección) Street (Ciudad) City (Estado) State (Código Postal) Zip

Mailing Address: _____
Dirección postal PO Box or Street, City, State and Zip

E-Mail Address: MarieAnnulyse@yahoo.com
(Dirección e-mail)

Home Phone: (305) 923 4286 Work Phone: (305) 294 9588 Cellular: () _____
Teléfono Particular Teléfono del Trabajo Celular

B. NATURE OF COMPLAINT: Naturaleza de la denuncia:

Battery Rudeness Deficient Service Truthfulness Driving False Arrest Excessive Force Searches Other

C. INFORMATION ABOUT THE OFFICER(S) INVOLVED IN THE INCIDENT

DATOS DEL (DE LOS) OFICIAL (ES) INVOLUCRADO(S) EN EL INCIDENTE

Name: Mark Siracuse Badge #: _____ Vehicle #: _____
Nombre Placa No: Patrulla No.

Please provide a physical description of officer:
Describe la apariencia física del oficial: _____

Name: _____ Badge #: _____ Vehicle #: _____
Nombre Placa No: Patrulla No.

Please provide a physical description of officer:
Describe la apariencia física del oficial: _____

Name: _____ Badge #: _____ Vehicle #: _____
Nombre Placa No: Patrulla No.

Please provide a physical description of officer:
Describe la apariencia física del oficial: _____

D. VICTIM/WITNESS INFORMATION
DATOS DE LA VICTIMA/TESTIGO

Did you witness the incident? Yes No
¿Fue usted testigo del incidente denunciado? Si No

If you are filing a complaint on behalf of someone else, what is your relationship, if any, to the person(s):
Si usted está presentando una denuncia en nombre de otra(s) persona(s), indique cuál es su relación, si la hay, con esa(s) persona(s):

Parent Spouse Relative Guardian Child Friend Other **Fiancee**
Padre/Madre Conyuge Familiar Tutor Hijo/a Amigo/a Otra

Please provide as much of the following information as you can about the person(s) on whose behalf the complaint is filed and any witness(es) to the incident:
Suministre la mayor cantidad posible de la información que se solicita a continuación, sobre la (las) persona(s) en nombre de la(s) cual(es) presenta la denuncia, y sobre el (los) testigo(s) del incidente:

Victim/Witness #1
Victima/Testigo No. 1

Is this person a: victim witness
Esta persona es: víctima testigo

Name: Matthew Shawn Murphy % Jackson Memorial long term
Nombre care
Address: 2500 Nw 22nd Ave City Miami State FL
Dirección: 33142 Ciudad: 786-466-3000 Estado:
Zip Code 33142 Contact numbers: Telephone 786-466-3000 Cell _____
Código Postal Teléfono

Victim/Witness #2
Victima/Testigo No. 2

Is this person a : victim witness
Esta persona es: víctima testigo

Name: _____
Nombre _____
Address: _____ City _____ State _____
Dirección: _____ Ciudad: _____ Estado:
Zip Code _____ Contact numbers: Telephone _____ Cell _____
Código Postal Teléfono

Victim/Witness #3
Victima/Testigo No. 3

Is this person a : victim witness
Esta persona es: víctima testigo

Name: _____
Nombre _____
Address: _____ City _____ State _____
Dirección: _____ Ciudad: _____ Estado:
Zip Code _____ Contact numbers: Telephone _____ Cell _____
Código Postal Teléfono

E. INFORMATION ABOUT THE INCIDENT
INFORMACION ACERCA DEL INCIDENTE

Please provide as much information as possible, using additional pages if necessary.
Suministre la mayor cantidad de informacion posible, utilizando páginas adicionales si fuese necesario.

Date: April, 16, 2011 Time: 3:30AM Location: Duval St Case # if applicable: _____
Fecha: April, 16, 2011 Hora: 3:30AM Lugar: Duval St No. de Caso, si corresponde: _____

see attached

Attach additional pages if necessary. Page number ____ of ____ pages of narrative
Are you being prosecuted for this incident or do you have a pending criminal case? Yes ____ No
Have you ever been convicted of a felony? Yes ____ No

"I hereby certify that, to the best of my knowledge, and under the penalty of perjury, the statements made herein are true." I hereby acknowledge and understand that any documents, materials, medical records, e-mail and other communication delivered to the CRB office becomes public record and shall be viewable on the internet by anyone or any entity. You have been advised that any statement made to the CRB can be used by other governmental entities.

Maria X. Andrade Signature of Complainant 7/23/14 Date signed

Complaint Received by:	Complaint Reviewed by:	Action Taken:
Date complaint forwarded to Chief of Police: _____		

Citizen Review Board

100 Grinnell Street, Key West, FL 33040
PO Box 1946, Key West, FL 33041
(305) 809-3887 Fax (305) 293-9827
email: crb@keywestcity.com

- What you need to know before completing the attached complaint form:
- This complaint and any attachment become public record. If you have already filed a report with Key West Police Department Internal Affairs, and you want that complaint to remain confidential until the investigation is complete, you may want to refrain from filing at this time.
- Complaints should be filed as soon as possible the time you became aware of the incident or after resolution of any criminal charges.
- Anyone who has criminal charges pending related to this complaint should consult an attorney before filing the complaint with the CRB and such pending charges may delay the progress of the investigation of your complaint with the CRB. Further, any statements made to the CRB are public record and can be used by anyone to incriminate the complainant. All statements will be uploaded to the internet
- Complainants must advise the CRB of any changes of address or phone number; failure to provide the CRB current information or means for CRB to contact the complainant may result in dismissal of the case.
- All documents received by this office, including medical records, photo IDs, communications and alike become public records and will be disclosed on the Internet and viewable by anyone or any person. You should consider this fact before sending any matters or materials to this office.
- The CRB and its employees and agents are not your legal representatives. You should seek independent legal representations to understand your legal rights regarding the matters referenced in your complaint.
- The CRB jurisdiction is limited to City of Key West Police Officers and NOT Monroe county sheriffs, correction officers, Florida Fish and Wildlife Officers, FDLE representatives, Florida Highway Patrol Officers, Federal Agents, Military personal and alike.

I have read and understand the information provided to me on this page.

Marie Kertonne Annalyse
Name/Nombre

7/16/2014.
Date/Fecha

INFORMATION ABOUT THE INCIDENT

What happened:

On April 16, 2011, at approx 3:30 am, Matthew Shaun Murphy and I were walking down Duval St. on our way home. A couple was sitting on the steps in front of the store "Fleet." The guy stopped Matt who was walking a little behind me and asked him for something. I believe ~~that he was~~ ^{he was} asking Matt for drugs. I said, "let's go" to Matt and we began to walk away. The woman then said "Nigger-Lover!" Matt started arguing with them. I pulled Matt away and the woman said, "That's how you guys make monkey babies." Matt turned back around and was arguing w/ the man. I got in the middle of them. I was facing the other man w/ Matt behind me. I heard a loud thump and everyone exclaiming "Wah!" I turned around and saw Matt on the ground. His eyes were rolled up in his head. ^{I had not seen the officer.} I then saw officer Sniacuse and I started screaming, "He didn't do anything." Officer Sniacuse pointed the taser at me and said, "Back-off!" "Back-off!" I ran away - scared to death. I didn't know how badly Matt was hurt. I called the jailhouse later that morning. They said he wasn't there. I saw that my phone had a missed call from a 786#. I listened to the voice mail. It was Jackson Memorial Hospital telling me Matt was about to go into surgery. I went to the police station. Matt ~~is~~ had my driver's license and car keys. I met with Officer

William. I gave him a statement and he gave me my d/L and Key. I drove to Jackson Memorial to see Matt.

Complaint:

- ① Officer Suroose did not announce himself before tasing Matthew. He lied in his report.
- ② Using the taser was excessive because he could have just ~~asked~~ ordered Matthew and the man to sit down.
- ③ Using the taser was excessive because ~~the~~ Matthew has been at Jackson Memorial since that day over 3 years ago. He can't walk, speak and is being fed through a tube.
- ④ The officers on scene did not conduct a proper investigation: they did not get contact info for all witnesses.
 - There was a white guy who worked at Daddy Boreas who saw everything
 - There were 2 black men right next to us who saw everything.
 - There were at least a dozen people in the area.
 - They questioned ^{only some} people who did not see everything.
- ⑤ There was no investigation even though Matt's brother-in-law requested

one and the MOU between FDLE and
KWPD requires one. Chief should have
asked FDLE to conduct a full investigation.

I, Marie Annulyse, have read the
above statement. It was dictated to
Naja Girard on July 16, 2014 and
it is true and correct to the best
of my knowledge.

Marie Annulyse.
Marie Annulyse.