

# Response to Resistance Report

Key West Police Department

Case No: 14-5478

## 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)

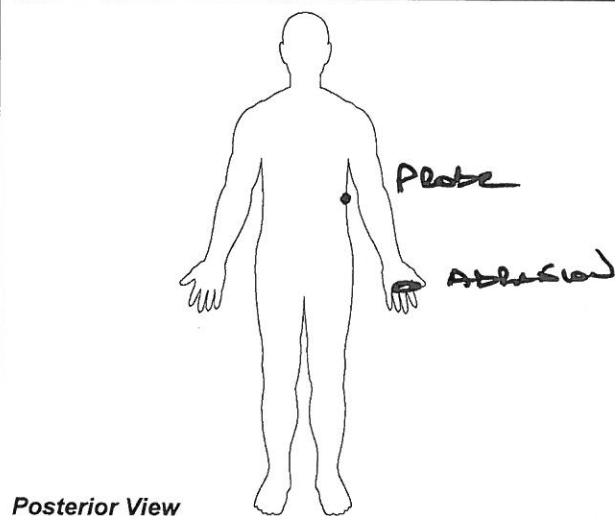
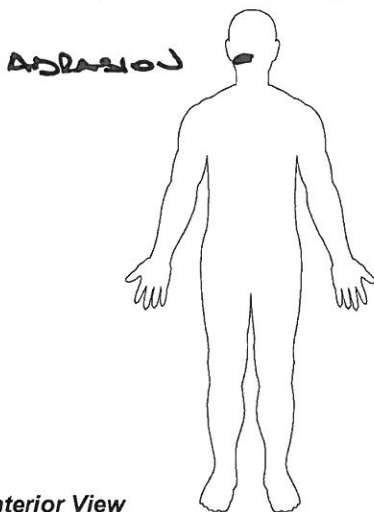
2. Date: 11/14/14 3. Time: 0033 4. Location: 211 Duval 5. Incident type: 22P

6. Resistance Level	7. Explanation	8. Response Option	9. Explanation
<input checked="" type="checkbox"/> Passive:	Non-Compliance	<input type="checkbox"/> Physical Control	
<input checked="" type="checkbox"/> Active:	Clinching, pushing, pulling	<input checked="" type="checkbox"/> Non-lethal Weapon	TASER
<input checked="" type="checkbox"/> Aggressive:	Fighting	<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)

While Officer Young and Sgt. Blasberg were on foot beat at the 200 block of Duval Street, a large fight broke out. After loud verbal commands (Key West Police Stop! Get down, down! Taser Taser!), suspects continued fighting, striking with closed fists, Tasers were deployed. Sgt Blasberg's Taser struck one probe on Sean King's Right thigh, and the other on Aaron Sidora's Right arm pit. Because both King and Sidora were clinched together, at the time the probes stuck, both were affected by the Taser After the first cycle, a second cycle was necessary due to noncompliance. After the second cycle both Sidora and King complied and were cuffed. EMS 1 responded and rendered first aid to Sidora and King. Sidora and King were taken to the Lower Keys Emergency Room by patrol car. Once cleared medically, for the evident injuries, Sidora and King were transported to MDCD for booking process.

11. Last Name: SIDORA 12. First: AARON 13. Race: W 14. Sex: M  
15. DOB: 6/6/18 16. Height: 602 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



# Response to Resistance Report

Key West Police Department

Case No: 14-5478

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

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☐ Discharge of firearm in the line of duty off-duty or on-duty (other than for training, maintenance or ballistics testing)

2. Date: 11/14/14

3. Time: 0033

4. Location: 211 Duval

5. Incident type: 22P

### 6. Resistance Level

### 7. Explanation

### 8. Response Option

### 9. Explanation

☒ Passive:

Non compliance

☐ Physical Control

☒ Active:

Clinching, pushing, pulling

☒ Non-lethal Weapon

TASER

☒ Aggressive:

Fighting

☐ Deadly Force

☐ Deadly Force:

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

While Officer Young and Sgt. Blasberg were on foot beat at the 200 block of Duval Street, a large fight broke out. After loud verbal commands (Key West Police Stop! Get down, down! Taser Taser!), suspects continued fighting, striking with closed fists, Tasers were deployed. Sgt Blasberg's Taser struck one probe on Sean King's Right thigh, and the other on Aaron Sidora's Right arm pit. Because both King and Sidora were clinched together, at the time the probes stuck, both were affected by the Taser. After the first cycle, a second cycle was necessary due to noncompliance. After the second cycle both Sidora and King complied and were cuffed. EMS 1 responded and rendered first aid to Sidora and King. Sidora and King were taken to the Lower Keys Emergency Room by patrol car. Once cleared medically, for the evident injuries, Sidora and King were transported to MDCDC for booking process.

11. Last Name: KING

12. First: SEAN

13. Race: W

14. Sex: M

15. DOB: 7/20/77

16. Height: 600

17. Weight: 200

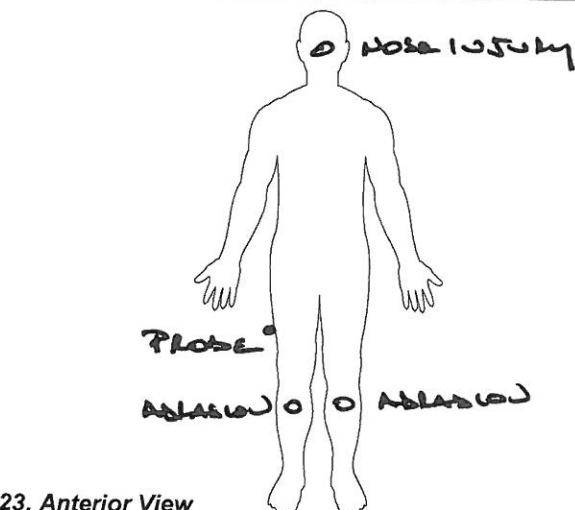
18. Did you observe the subject: ☐ No ☒ Yes

If NO, explain why in Section 5. If "YES", complete sections 19-23

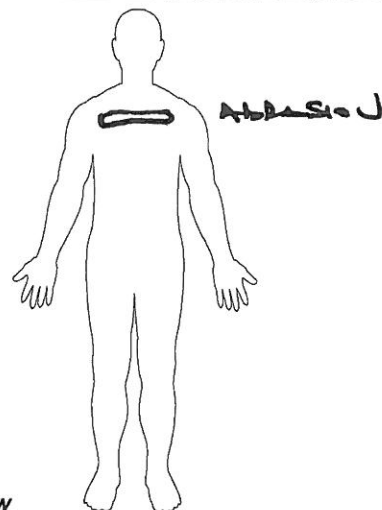
19. Appeared to be: ☒ Intoxicated ☐ Under the influence of controlled substance ☐ Emotionally / mentally disturbed

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



23. Anterior View

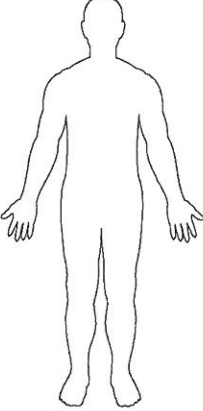
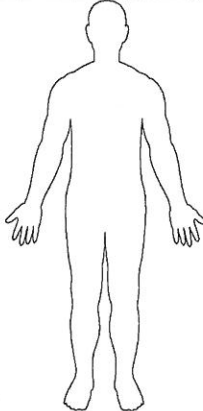


Posterior View

# Response to Resistance Report (continued)

Key West Police Department

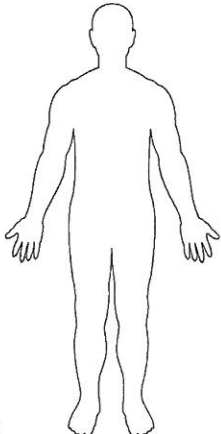
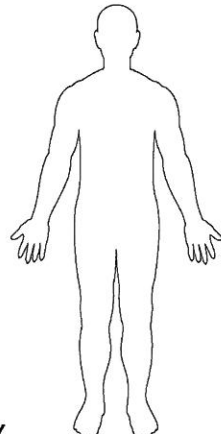
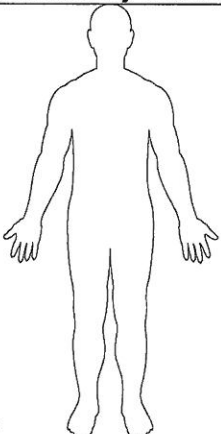
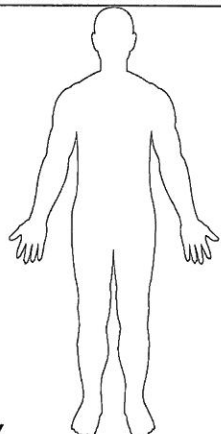
Case No: 14-5478

OFFICER	24. Officer: Frank Blasberg		25. Race: White	26. Sex: Male	27. Age: 52											
	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: 29											
	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)																
OFFICER																
	34. Anterior View		Posterior View													
TASER USE ONLY	35. TASER® device serial # X00474930			36. TASER® device serial #												
	TASER®Cam serial # V08007238			TASER®Cam serial #												
	Cartridge 1 serial # C41027NCY			Cartridge 1 serial #												
	Cartridge 2 serial # N/A			Cartridge 2 serial #												
	Number of cycles: 2			Number of cycles:												
	Type of contact: <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Did probes penetrate skin: <input type="checkbox"/> Yes <input type="checkbox"/> No												
	Target distance at probe launch: 5 Feet			Target distance at probe launch:												
	Distance between probes: 30 inches			Distance between probes:												
	Probes removed by (name): Ofc. Bouvier			Probes removed by (name):												
Device downloaded by: Sgt Blasberg			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: 11/14/14		39. Time: 00:33													
	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)															
	<table border="1"><thead><tr><th>Name</th><th>Address</th><th>Phone Number</th></tr></thead><tbody><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></tbody></table>					Name	Address	Phone Number								
Name	Address	Phone Number														
INT. AFF.	43. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS		Pablo Rodriguez / 2298		11/14/14											
	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)		44. Preparing Supervisor's Signature / ID		45. Date											
49. If section 46 is "No" record the Professional Standards Control Number:		47. Signature of Internal Affairs Inspector		48. Date												
50. Date Entered:																

# Response to Resistance Report (continued)

Key West Police Department

Case No: 14-5478

INCIDENT	<b>51. Description (Section 10 continued):</b> <i>Sidora had an abrasion in his jaw area assumed to be from the fight. Abrasions to his right hand assumed to be from fight and a puncture wound in his right armpit area from the Taser probe. He had to be medically cleared by the hospital as required by MCDC.</i>  <i>King had an obvious nose injury assumed to be from the fight. A puncture wound from the Taser probe in his Right thigh. Bilateral knee abrasions and back abrasions which I was unable to determine the cause of. He had to be medically cleared by the hospital as required by MCDC.</i>	
OFFICER	<b>24. Officer:</b> _____ <b>25. Race:</b> _____ <b>26. Sex:</b> _____ <b>27. Age:</b> _____	
	<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> _____	
	<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 )	
	<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	
	<b>33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)</b>	
	 <b>34. Anterior View</b>	 <b>Posterior View</b>
OFFICER	<b>24. Officer:</b> _____ <b>25. Race:</b> _____ <b>26. Sex:</b> _____ <b>27. Age:</b> _____	
	<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> _____	
	<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 )	
	<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	
	<b>33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)</b>	
	 <b>34. Anterior View</b>	 <b>Posterior View</b>

# Response to Resistance Report

Key West Police Department

Case No: 14-5478

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☐ 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: 11/14/14

3. Time: 0033

4. Location: 211 Duval

5. Incident type: 22P

### 6. Resistance Level

### 7. Explanation

### 8. Response Option

### 9. Explanation

☒ Passive:

Non compliance

☐ Physical Control

☒ Active:

Pulling, pushing

☒ Non-lethal Weapon

TASER

☒ Aggressive:

Fighting

☐ Deadly Force

☐ Deadly Force:

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

While Officer Young and Sgt. Blasberg were on foot beat at the 200 block of Duval Street, a large fight broke out. After loud verbal commands (Key West Police Stop! Get down, down! Taser Taser!), suspects continued fighting, striking with closed fists, Tasers were deployed. Ofc. Young's Taser struck J. Bolding on his back area. After one cycle. J. Bolding complied and was cuffed. Bolding had two puncture wounds from the Taser probes. EMS 1 responded and rendered first aid to J. Bolding. J. Bolding was taken to the Lower Keys Emergency Room by patrol car. To be medically cleared as required by MDCDC. Once cleared medically, J. Bolding was transported to MDCDC for booking process.

11. Last Name: BOLDING

12. First: JONATHAN

13. Race: W

14. Sex: M

15. DOB: 6/21/84

16. Height: 510

17. Weight: 180

18. Did you observe the subject: ☐ No ☒ Yes

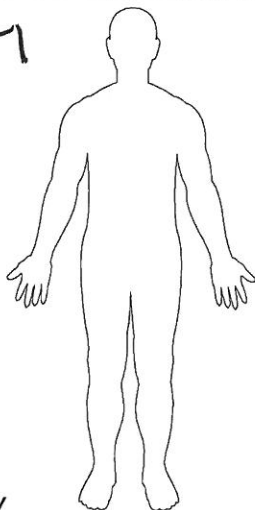
If NO, explain why in Section 5. If "YES", complete sections 19-23

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

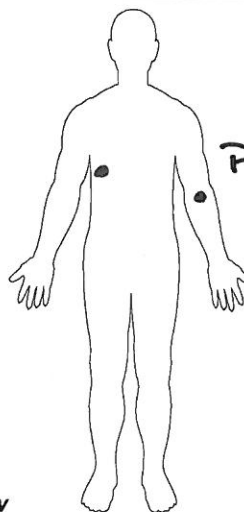
20. Injuries: ☐ No ☒ Evident ☐ Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 23)

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

NO INJURY



23. Anterior View



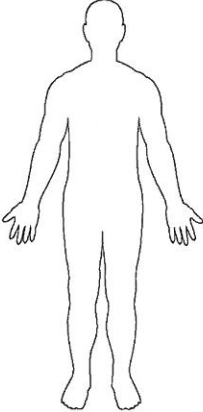
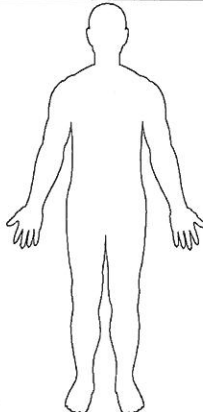
Posterior View



# Response to Resistance Report (continued)

Key West Police Department

Case No: 14-5478

<b>OFFICER</b>	<b>24. Officer:</b> Jessie Young <b>25. Race:</b> White <b>26. Sex:</b> Male <b>27. Age:</b> 33			
	<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> 10			
	<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)</b>				
<b>OFFICER</b>				
	<b>34. Anterior View</b>		<b>Posterior View</b>	
<b>TASER USE ONLY</b>	<b>35. TASER® device serial #</b> X00550513 TASER®Cam serial # V08023339 Cartridge 1 serial # C4102N6TD Cartridge 2 serial # N/A Number of cycles: 1 Type of contact: <input checked="" type="checkbox"/> Probe <input type="checkbox"/> CODS <input type="checkbox"/> Drive Stun Did probes penetrate skin: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Target distance at probe launch: 8-10 feet Distance between probes: 18 inches Probes removed by (name): Ofc. Bouvier Device downloaded by: Sgt Frank Blasberg		<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>			
	<b>38. Notified Date:</b> 11/14/14		<b>39. Time:</b> 00:33	
	<b>40. Did you respond to the scene:</b> <input type="checkbox"/> No <input checked="" 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	
<b>SUPERVISOR'S INQUIRY</b>	<b>43. Is further review recommended:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS</b>		Pablo Rodriguez / 2298 <b>44. Preparing Supervisor's Signature / ID</b>	
			11/14/14 <b>45. Date</b>	
	<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 checked="" type="checkbox"/> Yes (If "No", complete section 49)		<b>47. Signature of Internal Affairs Inspector</b>	
	<b>49. If section 46 is "No" record the Professional Standards Control Number:</b>		<b>50. Date Entered:</b>	
<b>INT. AFF.</b>	11/29/14 <b>48. Date</b>		1679 <b>47. Signature of Internal Affairs Inspector</b>	

# Response to Resistance Report

Key West Police Department

Case No: 14-5643

## 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: 11/25/14 3. Time: 1615hrs 4. Location: 5501 College Rd (jail) 5. Incident type: Drug Arrest

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

- ☐ Passive:
- ☒ Active: Subject braced himself twice, refused to comply, tried to move handcuffs to front
- ☐ Aggressive:
- ☐ Deadly Force:
- ☒ Physical Control
- ☐ Non-lethal Weapon
- ☐ Deadly Force

10. Description of Incident: (If additional space is needed, continue in section 51 or use separate page if needed)  
Ofc. Michael Chaustit arrested the DEFENDANT on drugs charges and transported him to the county jail. While the DEFENDANT was being transported he tried to move his handcuffs to the front and Ofc. M. Chaustit had to ask him to not move the handcuffs. When Ofc. M. Chaustit arrived at the jail he realized the DEFENDANT had moved his handcuffs half way down his legs and was trying to step through them to put them in front. Ofc. M. Chaustit gave him verbal commands not to do so and tried to have the DEFENDANT step out of the vehicle. The DEFENDANT braced up and tried not to be taken out of the vehicle. Ofc. M. Chaustit did a takedown and removed the DEFENDANT from a sitting position in the vehicle to the ground in the "SALLEY PORT" area of the jail. Ofc. M. Chaustit was then able to fix the handcuffs and gain compliance. When Officer M. Chaustit stood the DEFENDANT up, the DEFENDANT again tried to brace up. Ofc. M. Chaustit had to use a transporter technique to keep control of the DEFENDANT while taking him into the jail. (The DEFENDANT did suffer minor lacerations to both knees and a red mark to his left shoulder when he was taken to the ground. The DEFENDANT also had a red mark across his back, from where (cont-)

11. Last Name: Dale 12. First: Christopher 13. Race: white 14. Sex: male

15. DOB: 2/15/85 16. Height: 6'00" 17. Weight: 185 to 195

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

23. Anterior View

Posterior View

Small laceration

Small laceration

Small laceration

Small laceration

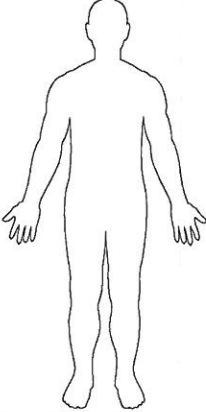
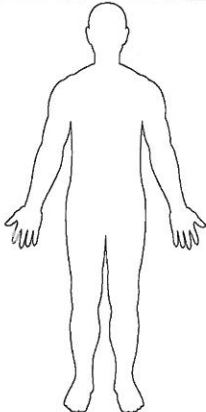
Red mark

Red mark

# Response to Resistance Report (continued)

Key West Police Department

Case No: 14-5643

OFFICER	24. Officer: Michael Chaustit		25. Race: white	26. Sex: Male	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: 8 1/2	
	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)					
OFFICER					
	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: 11/25/14		39. Time: 1615hrs		
	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
INT. AFF.	43. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Sgt. H. Wood <i>Sgt. H. Wood</i> 2091 11/25/14		
	FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS		44. Preparing Supervisor's Signature / ID 45. Date		
	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>1679</i> 48. Date <i>12/2/14</i>		
49. If section 46 is "No" record the Professional Standards Control Number:		50. Date Entered:			

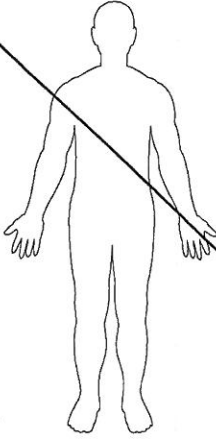
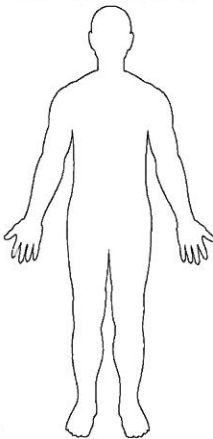
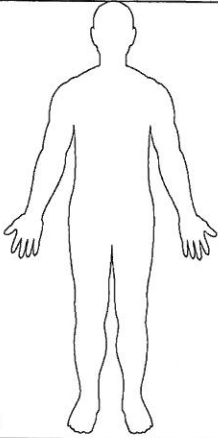
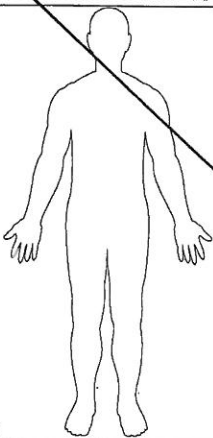


# Response to Resistance Report (continued)

Key West Police Department

Case No:

14-5643

INCIDENT	<b>51. Description (Section 10 continued):</b> Ofc. M. Chaustit had to place his knee while gaining compliance. The DEFENDANT also had two small lacerations on his wrists from where he was trying to manipulate the handcuffs. All injuries were photographed. While I was taking pictures of the DEFENDANTS wrists he made a comment "It was my fault for messing with the handcuffs". The DEFENDANT did seem to be under the influence of either alcohol or narcotics.			
OFFICER	<b>24. Officer:</b> _____ <b>25. Race:</b> _____ <b>26. Sex:</b> _____ <b>27. Age:</b> _____			
	<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> _____			
OFFICER	<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 )			
	<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			
OFFICER	<b>33. Response option used by this officer:</b> (If TASER®, also reference line number from TASER® section)			
	<div><div>34. Anterior View</div></div> <div><div>Posterior View</div></div>			
OFFICER	<b>24. Officer:</b> _____ <b>25. Race:</b> _____ <b>26. Sex:</b> _____ <b>27. Age:</b> _____			
	<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> _____			
OFFICER	<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 )			
	<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			
OFFICER	<b>33. Response option used by this officer:</b> (If TASER®, also reference line number from TASER® section)			
	<div><div>34. Anterior View</div></div> <div><div>Posterior View</div></div>			