

# Response to Resistance Report

Key West Police Department

Case No: 15-0030

## 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)

INCIDENT

2. Date: 01/02/15 3. Time: 0134 4. Location: 1010 Emma St 8C 5. Incident type: Fleeing and Eluding

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

- ☐ Passive: ☒ Physical Control Take Down
- ☐ Active: ☐ Non-lethal Weapon
- ☒ Aggressive: Charged Ofc Leahy ☐ Deadly Force
- ☐ Deadly Force:

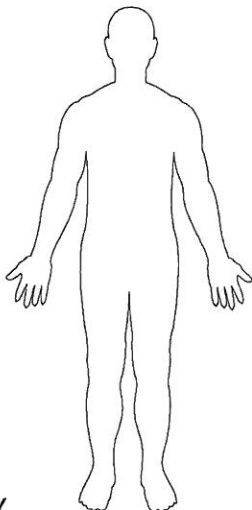
## 10. Description of Incident: (If additional space is needed, continue in section 51 or use separate page if needed)

Subject CADE was wanted for committing traffic violations and fleeing and eluding police, by Officer Hammers. The scooter CADE was driving was found near building 8 of Fort Village by Officer Rodriguez. Officer Rodriguez observed a subject with dreads, matching the description given by Ofc. Hammers, walking away from the scooter and towards the said building. Officer Rodriguez gave loud verbal commands to stop, but the subject entered apartment 8C. Police K-9 Cyress and Handler Officer Richardson, obtained a scent from the scooter and tracked the scent to apartment 8C, where the subject had entered. Officers went to the front door and attempted to make contact with the subject. A female exited the apartment first, then a male subject identified as CADE. Officers gave repeated loud verbal commands for CADE to get to the ground.

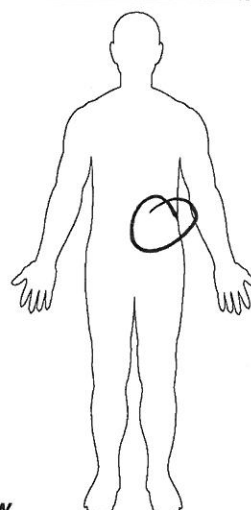
SUBJECT

11. Last Name: Cade 12. First: Laquenton 13. Race: B 14. Sex: M  
15. DOB: 02/10/1977 16. Height: 5'07" 17. Weight: 150  
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



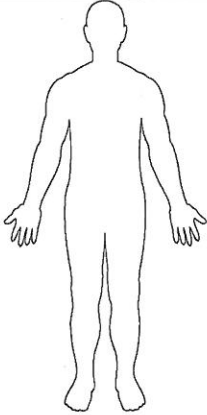
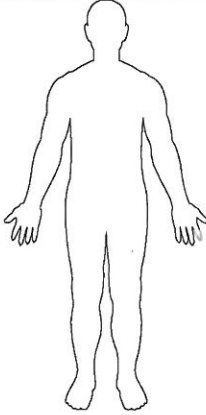
Posterior View



# Response to Resistance Report (continued)

Key West Police Department

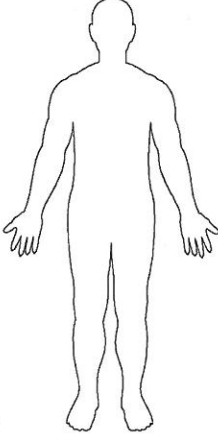
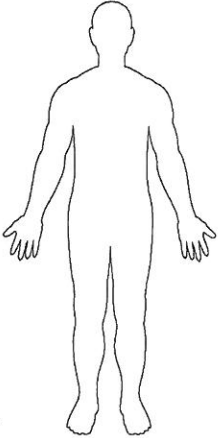
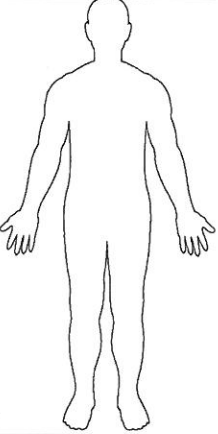
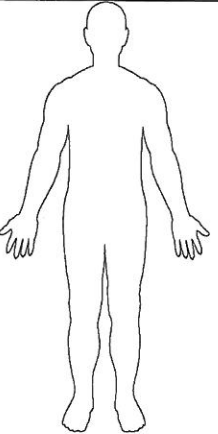
Case No: 15-0030

<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: 01/02/15				39. Time: 0134 hours				
	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				
<b>INT. AFF.</b>	43. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				44. Preparing Supervisor's Signature / ID				
	FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS				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				
49. If section 46 is "No" record the Professional Standards Control Number:				50. Date Entered:					

# Response to Resistance Report (continued)

Key West Police Department

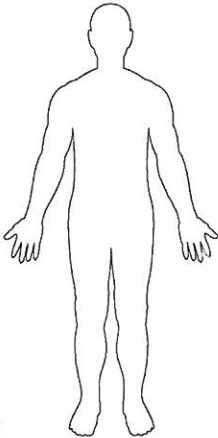
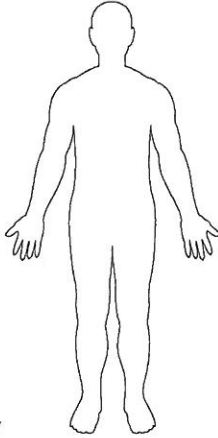
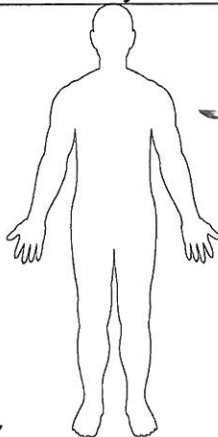
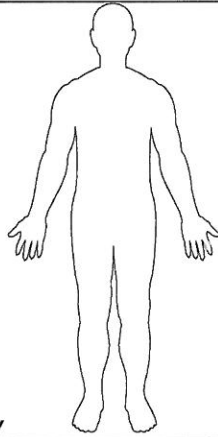
Case No: 15-0030

INCIDENT	<b>51. Description (Section 10 continued):</b> CADE made an aggressive move towards Officer Leahy and Sergeant Smith observed this and completed a straight arm bar takedown on CADE on the front porch of apartment 8C. CADE appeared to be in pain and was screaming while he was on the ground. CADE made reference to his preexisting back condition. CADE was assisted from the ground and was seated on a chair on the porch. Sergeant Smith and I, repeatedly asked CADE if he wanted a rescue unit to come check him out. CADE refused any medical treatment. There were no visible signs of injuries on CADE at the scene. CADE was then taken to Officer Hammers patrol vehicle. Once inside the patrol vehicle, CADE continued to scream and then made a comment about having chest pains.	
OFFICER	<b>24. Officer:</b> N/A <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) 35</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 (continued)

Key West Police Department

Case No: 15-0030

INCIDENT	<b>51. Description (Section 10 continued):</b> Rescue was then summoned and CADE was subsequently transported to LKMC. Officer Malsheimer accompanied CADE to the hospital, and took photographs. During transport to LKMC, Officer Malsheimer said CADE struck his head against the stretcher. Officer Malsheimer activated his TASER cam in an attempt to capture CADE' behavior. CADE did not strike his head anymore, but became very vocal. There were no visible injuries as a result him striking his head, during transport. The TASER video was downloaded and is attached to this report.	
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> _____	
	<div>34. Anterior View </div>	<div>Posterior View </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> _____ <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> _____	
	<div>34. Anterior View </div>	<div>Posterior View </div>



# Response to Resistance Report

Key West Police Department

Case No: 15-0046

## 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: 1/03/15 3. Time: 0114 4. Location: 301 Simonton St 5. Incident type: Resist W/Violence

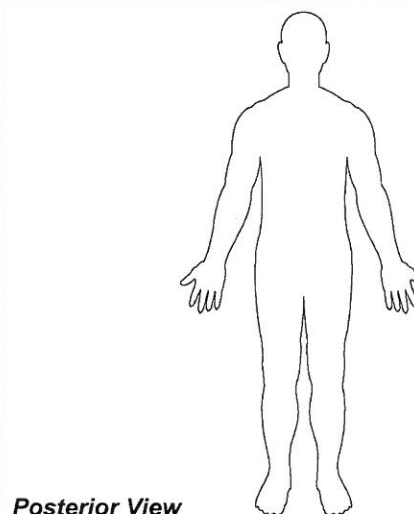
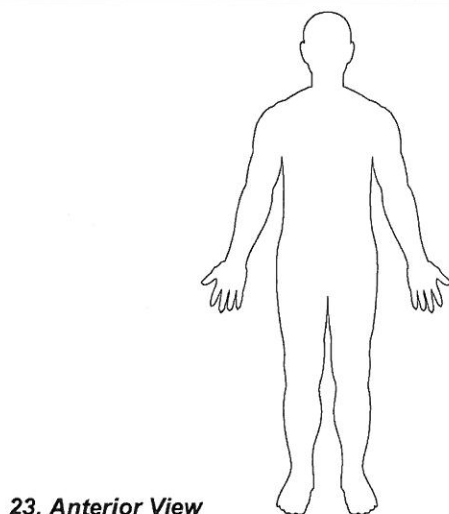
6. Resistance Level	7. Explanation	8. Response Option	9. Explanation
<input checked="" type="checkbox"/> Passive:	Refuse verbal ord	<input checked="" type="checkbox"/> Physical Control	Hand Cuffs, Hobble
<input checked="" type="checkbox"/> Active:	Pulling away	<input type="checkbox"/> Non-lethal Weapon	
<input checked="" type="checkbox"/> Aggressive:	Spitting, Kicking	<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)

On 1/3/15, at about 0115 hours, Officer D. Hall placed Z. Barker in custody as a Marchman Act. Z. Barker resisted by pulling, kicking and spitting. Barker was cuffed and hobbled, without take-downs or strikes. While enroute to Monroe County Detention Center, Z. Barker complained that he was punched and kicked in the face by officer Hall. I observed no obvious signs of injuries. Barker appeared to be intoxicated, drugged and/or mentally disturbed. Officer hall had his Coban activated at all times. Barker was photographed and processed at Monroe County Detention Center

Officer Diaz was at the scene when Z. Barker spat on Officer Hall's face.  
Officer Hall went to the Emergency Room and had his eyes flushed/received treatment.

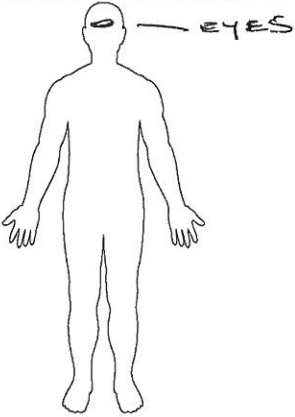
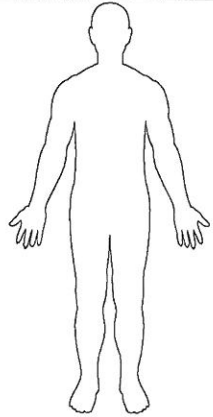
11. Last Name: BARKER 12. First: ZACHARY 13. Race: W 14. Sex: M  
15. DOB: 6/9/1991 16. Height: 5'6 17. Weight: 160  
18. Did you observe the subject: ☐ No ☒ Yes If NO, explain why in Section 5. If "YES", complete sections 19-23  
19. Appeared to be: ☒ Intoxicated ☒ Under the influence of controlled 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 (continued)

Key West Police Department

Case No: 15-0046

<b>OFFICER</b>	<b>24. Officer:</b> David Hall				<b>25. Race:</b> W		<b>26. Sex:</b> M		<b>27. Age:</b> 36				
	<b>28. Duty Status:</b> <input checked="" type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment <input type="checkbox"/> Uniformed <input checked="" type="checkbox"/> Plain clothes										<b>29. Yrs Exp:</b> 11		
	<b>30. Injuries:</b> <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)												
	<b>31. Photographed:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				<b>32. Treated:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <b>By:</b> <input type="checkbox"/> EMT/Paramedic on scene <input checked="" type="checkbox"/> Hospital								
	<b>33. Response option used by this officer:</b> (If TASER®, also reference line number from TASER® section) 35												
<b>OFFICER</b>													
	<b>34. Anterior View</b>						<b>Posterior View</b>						
<b>TASER USE ONLY</b>	<b>35. TASER® device serial #</b>						<b>36. TASER® device serial #</b>						
	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"/> <b>37. Check and list any additional TASER® devices, cartridges or details in the incident description section.</b>													
<b>SUPERVISOR'S INQUIRY</b>	<b>38. Notified Date:</b> 1/3/2015						<b>39. Time:</b> 0137						
	<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				Phone Number				
<b>INT. AFF.</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>												
	<b>44. Preparing Supervisor's Signature / ID</b>										<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>48. Date</b>		
<b>49. If section 46 is "No" record the Professional Standards Control Number:</b>												<b>50. Date Entered:</b>	

# Response to Resistance Report

Key West Police Department

Case No: 15-000181

## 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: 1/10/2015

3. Time: 11:05

4. Location: 900 Winsor Ln

5. Incident type: Felony Warrant arr

### 6. Resistance Level

### 7. Explanation

### 8. Response Option

### 9. Explanation

☐ Passive:

☒ Active:

☒ Aggressive:

☐ Deadly Force:

Fled on foot from officer

Striking at officer

☐ Physical Control

☒ Non-lethal Weapon

☐ Deadly Force

Taser

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

While on patrol in the area at Winsor Ln, Ofc. Sellers recognized the subject and knew she had felony warrants for Agg. Assault with a weapon. When she started talking to her, the subject started running south on Winsor Ln. Ofc. Sellers pursued her on foot, warning her several times that she would "taze" her if she did not stop. Ofc. Sellers had her Taser out when the subject turned around and "swatted" at her, striking it, causing it to discharge into the ground. She then continued to run south. Ofc. Sellers changed the cartridge and again warned her she was going to "taze" her. At the intersection of Winsor Ln. and Olivia St. she deployed the Taser, striking the subject in the buttock and leg. The subject grabbed a utility pole and slid to the ground. She was then handcuffed. One probed struck just above her right buttock and it is not known where on the right leg it struck as it came out as she was going to the ground. The subject was not injured.

11. Last Name: Clark

12. First: Shamika

13. Race: B

14. Sex: F

15. DOB: 10/29/1986

16. Height: 5'4"

17. Weight: 225

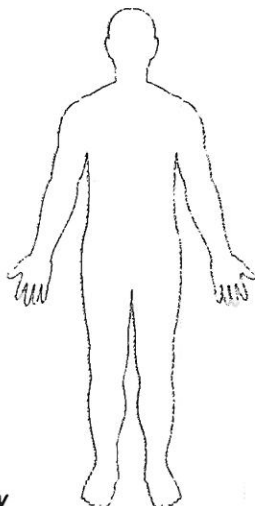
18. Did you observe the subject: ☐ No ☒ Yes If NO, explain why in Section 5. If "YES", complete sections 19-23

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

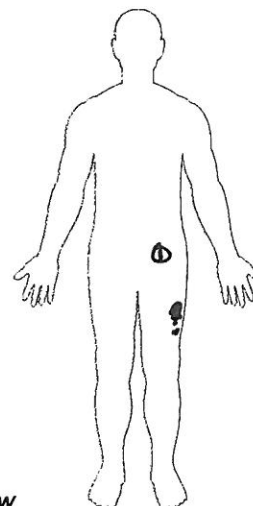
20. Injuries: ☒ No ☐ Evident ☐ Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 23)

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

SUBJECT



23. Anterior View

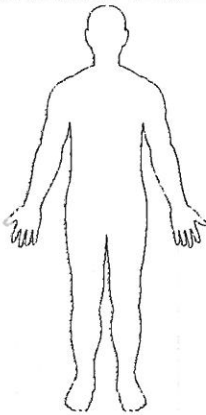
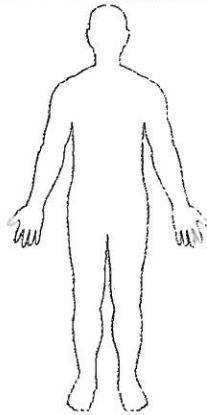


Posterior View

# Response to Resistance Report (continued)

Key West Police Department

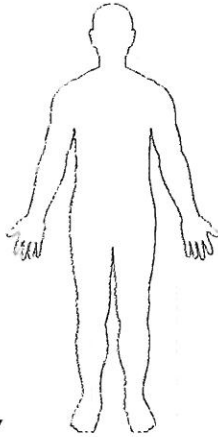
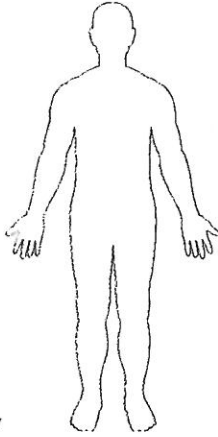
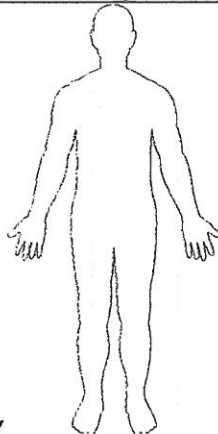
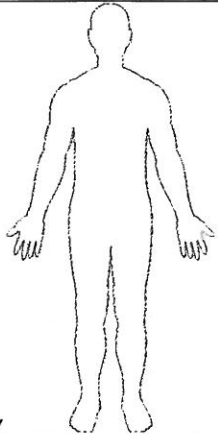
Case No: 15-000181

<b>OFFICER</b>	<b>24. Officer:</b> Brenda S. Sellers				<b>25. Race:</b> W		<b>26. Sex:</b> F		<b>27. Age:</b> 46	
	<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					
	<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:</b> (If TASER®, also reference line number from TASER® section)									
<b>OFFICER</b>										
	<b>34. Anterior View</b>					<b>Posterior View</b>				
<b>TASER USE ONLY</b>	<b>35. TASER® device serial #</b> X00-474998					<b>36. TASER® device serial #</b>				
	TASER®Cam serial # V08-007289					TASER®Cam serial #				
	Cartridge 1 serial # C41027NCH					Cartridge 1 serial #				
	Cartridge 2 serial # C41027N03					Cartridge 2 serial #				
	Number of cycles: na					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: 20'+					Target distance at probe launch:				
	Distance between probes: na					Distance between probes:				
	Probes removed by (name): na					Probes removed by (name):				
Device downloaded by: Sgt J. Williamson					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>SUPERVISOR'S INQUIRY</b>	<b>38. Notified Date:</b> 1/10/2015					<b>39. Time:</b> 11:09				
	<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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "Yes," list below)									
	Name			Address				Phone Number		
	Mike Mongo			1014 White St. Key West, FL 33040				(305) 304-1555		
<b>INT. AFF.</b>	<b>43. Is further review recommended:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS									
	44. Preparing Supervisor's Signature / ID					45. Date				
	<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)									
47. Signature of Internal Affairs Inspector					48. Date					
<b>49. If section 46 is "No" record the Professional Standards Control Number:</b>										
<b>50. Date Entered:</b>										

**Response to Resistance Report (continued)**

Key West Police Department

Case No: 15-000181

INCIDENT	<b>51. Description (Section 10 continued):</b> The subject claimed to be 5 1/2 months pregnant however has only been out of prison for two months. I attempted to download Ofc. Seller's Taser and was able to get the firing data however the video did not record. I removed the camera and battery and when I reinstalled it, it started working again. Even though she has spark tested it several times, the last test video on the camera was on October 25 <sup>th</sup> , 2014.	
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	
	<b>29. Yrs Exp:</b> 0	
<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	
	<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: 15-0194

## 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: 01/11/2015 3. Time: 0010hrs 4. Location: 1010 Windsor Lane 5. Incident type: Resisting/S31

### 6. Resistance Level

- ☐ Passive:  
☒ Active:  
☐ Aggressive:  
☐ Deadly Force:

### 7. Explanation

Fleeing/Refused to show hand

### 8. Response Option

- ☐ Physical Control  
☒ Non-lethal Weapon  
☐ Deadly Force

### 9. Explanation

TASER

10. Description of Incident: (If additional space is needed, continue in section 51 or use separate page if needed)  
Please attached narrative due to length.

11. Last Name: Borges

12. First: Alberto

13. Race: B

14. Sex: M

15. DOB: 10/19/1988

16. Height: 5'08"

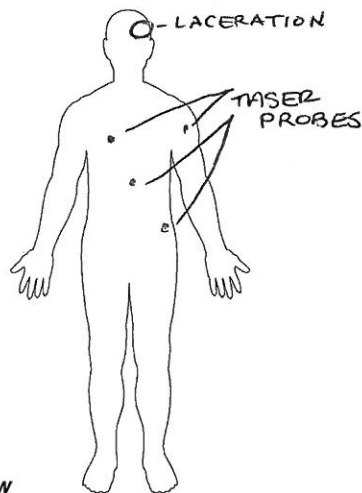
17. Weight: 180

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

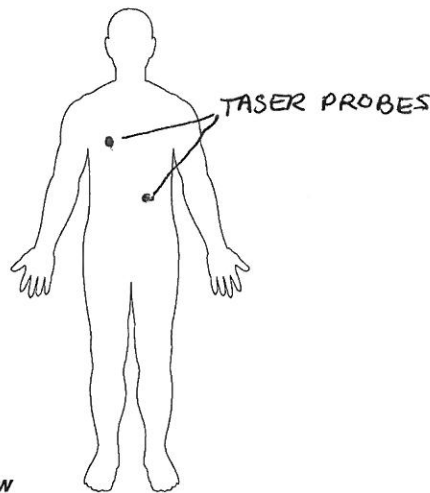
19. Appeared to be: ☐ Intoxicated ☐ Under the influence of controlled substance ☐ Emotionally / mentally disturbed

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



23. Anterior View

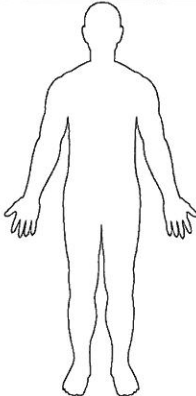
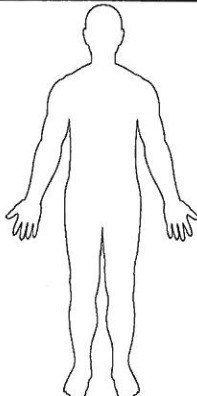


Posterior View

# Response to Resistance Report (continued)

Key West Police Department

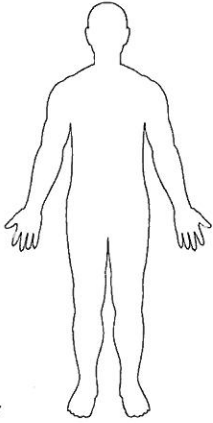
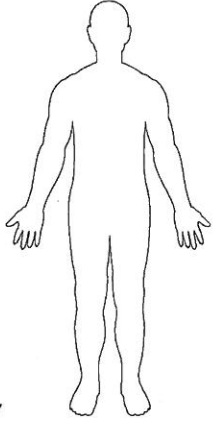
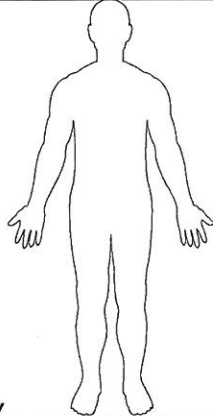
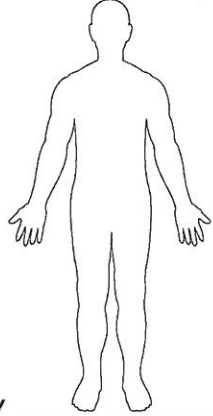
Case No: 15-0194

<b>OFFICER</b>	24. Officer: Curtiss Richardson			25. Race: W	26. Sex: M	27. Age: 29
	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: 4					
	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) TASER-35						
<b>OFFICER</b>						
	34. Anterior View			Posterior View		
<b>TASER USE ONLY</b>	35. TASER® device serial # X00-606219			36. TASER® device serial # X00-752746		
	TASER®Cam serial # V08-026710			TASER®Cam serial # V08-025996		
	Cartridge 1 serial # C4102N6RD			Cartridge 1 serial # C4102N6H5		
	Cartridge 2 serial # C4102N6RW			Cartridge 2 serial # N/A		
	Number of cycles: 5			Number of cycles: 1		
	Type of contact: <input checked="" type="checkbox"/> Probe <input type="checkbox"/> CODS <input type="checkbox"/> Drive Stun			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			Did probes penetrate skin: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	Target distance at probe launch: 4'/12'			Target distance at probe launch: 9'		
	Distance between probes: 10"/30"			Distance between probes: 16"		
	Probes removed by (name): Ofc. Morris			Probes removed by (name): Ofc. Morris		
Device downloaded by: Sgt. R. Smith			Device downloaded by: Sgt. R. Smith			
<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: 01/11/2015			39. Time: 0010 hrs		
	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			
<b>INT. AFF.</b>	43. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			44. Preparing Supervisor's Signature / ID		
	FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS			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		
49. If section 46 is "No" record the Professional Standards Control Number:			50. Date Entered:			

**Response to Resistance Report (continued)**

Key West Police Department

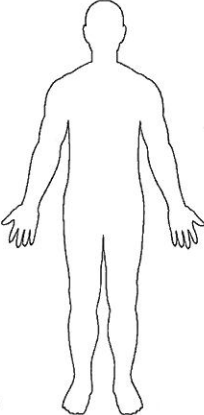
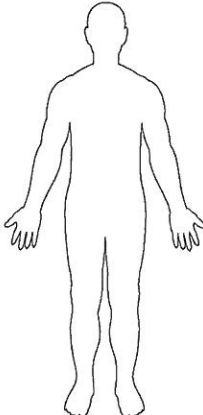
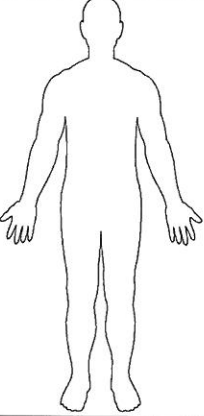
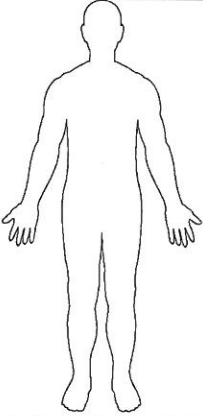
Case No: 15-0194

INCIDENT	51. Description (Section 10 continued):	
OFFICER	<b>24. Officer:</b> Cythia Williams <b>25. Race:</b> W <b>26. Sex:</b> F <b>27. Age:</b> 37	
	<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> 14	
OFFICER	<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 )	
	<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	
OFFICER	<b>33. Response option used by this officer:</b> (If TASER®, also reference line number from TASER® section) TASER-36	
	 <b>34. Anterior View</b>	 <b>Posterior View</b>
OFFICER	<b>24. Officer:</b> N/A <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)	
	 <b>34. Anterior View</b>	 <b>Posterior View</b>

# Response to Resistance Report (continued)

Key West Police Department

Case No: 15-0194

INCIDENT	51. Description (Section 10 continued):	
OFFICER	<div>24. Officer: N/A</div> <div>25. Race:</div> <div>26. Sex:</div> <div>27. Age:</div> <div>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</div> <div>29. Yrs Exp:</div> <div>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 )</div> <div>31. Photographed: <input type="checkbox"/> No <input type="checkbox"/> Yes</div> <div>32. Treated: <input type="checkbox"/> No <input type="checkbox"/> Yes</div> <div>By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital</div> <div>33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)</div>	
	<div>34. Anterior View</div> 	<div>Posterior View</div> 
OFFICER	<div>24. Officer: N/A</div> <div>25. Race:</div> <div>26. Sex:</div> <div>27. Age:</div> <div>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</div> <div>29. Yrs Exp:</div> <div>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 )</div> <div>31. Photographed: <input type="checkbox"/> No <input type="checkbox"/> Yes</div> <div>32. Treated: <input type="checkbox"/> No <input type="checkbox"/> Yes</div> <div>By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital</div> <div>33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)</div>	
	<div>34. Anterior View</div> 	<div>Posterior View</div> 

## CASE# 15-0194 RRI INCIDENT

Ofc. Richardson observed a female, Jocelyn Hall, he believed to have an active warrant and was the subject of a narcotic investigation. The female was walking with a male, Alberto Borges, who was unidentified at that time, but who was also part of a narcotic investigation. Ofc. Richardson, exited his vehicle and told Hall to step to the front of his vehicle. Upon doing so, Hall complied, but Borges began to walk to the passenger side of the vehicle and dig into his cargo pant pocket. Borges continued to move until his lower body was obstructed by the front end of Ofc. Richardson's vehicle, while still facing towards Ofc. Richardson. Fearing Borges was trying to retrieve a weapon, Ofc. Richardson drew his firearm and began to move around the front of his vehicle to see what Borges was reaching for. Ofc. Richardson continued giving repeated verbal commands to Borges to show his hands. Borges would not comply and continued to dig into his pocket as if attempting to retrieve something. Ofc. Richardson then drew his TASER as well, offering both lethal and less lethal protection. While this was happening a third party, Robert Albury, arrived on scene and began arguing with Hall. Ofc. Williams arrived and also drew her firearm believing Borges was attempting to retrieve a weapon from his pocket and was covering Borges, Hall, and Albury. Hall had remained at the front of the vehicle as instructed, Albury was a few feet away and yelling at Hall.

Ofc. Richardson continued to give repeated loud verbal commands for Borges to put his hands up, as well as to remove his hands from his pockets. After repeated commands and Borges not complying, Ofc. Richardson deployed his TASER striking Borges in the chest and causing him to fall to the ground. Due to the close proximity of Ofc. Richardson and Borges, and the limited probe spread on contact the deployment did not appear to complete full NMI. Borges continued to dig into his pocket, therefore Ofc. Richardson continued to hold the trigger down to gain compliance. Ofc. Richardson continued giving loud verbal commands to Borges to remove his hands from his pockets and place his hands behind his back, which he did not comply with. Borges was ultimately able to get to his feet, break a wire on one of the probes and attempt to flee. At this point Ofc. Richardson changed cartridges and while doing so, Ofc. Williams transitioned from her firearm to her TASER. Ofc. Williams then deployed her TASER, striking Borges in the side with both probes. Borges swept his arm, dislodging one probe and continued to try and flee. Ofc. Richardson had just finished changing cartridges and saw Borges sweep the probe out and continue to try and flee. Ofc. Richardson then fired his TASER'S second cartridge striking Borges with both probes and achieving NMI. Borges' body immediately locked up and he landed in a prone position striking his head on the ground as he did. Borges sustained a laceration over his left eye. Borges was later treated at LKMC and received five stitches for his laceration. Borges continued to disobey commands to place his hands behind his back and Ofc. Richardson delivered additional cycles from the TASER before he finally complied. During the altercation, Albury was also ordered to the ground at TASER point by Ofc. T. Calvert and handcuffed; Albury was later released. Borges was ultimately handcuffed and taken by Rescue to LKMC to treat his injuries. Both Sgt. D. Barrios and I (Sgt. R. Smith) were on scene for part of the interaction. Sgt. Barrios took photos of Borges and he and I collected all three cartridges used as well as AFIDS. All of the incident was captured on Ofc. Richardson's ICOP system and downloaded. I reviewed both Ofc. Richardson's TASER video and his ICOP video before completing this report.



# Response to Resistance Report

Key West Police Department

Case No: 15-260

## 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: 1/14/15 3. Time: 4. Location: 2806 Patterson Ave. 5. Incident type: Drug Investigation

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

- ☒ Passive: Verbal commands ☒ Physical Control Take down  
☐ Active: ☐ Non-lethal Weapon  
☐ Aggressive: ☐ Deadly Force  
☐ Deadly Force:

10. Description of Incident: (If additional space is needed, continue in section 51 or use separate page if needed)  
On January 14, 2015 the Special Investigations Unit executed a search warrant at 2806 Patterson Ave. While clearing the residence Det. S. Warmington encountered Miguel Perez in a shed in the rear of the property. Miguel was sitting in a chair. Det. Warmington was in a KWPD class C uniform and had a rifle in his hands. Det. Warmington identified himself as Key West Police and gave several verbal commands for Perez to get on the ground. Det. Warmington said Perez looked at him but was not responding to his verbal commands. Det. Warmington then pushed Perez in the chest with his foot causing Perez to fall to the floor. Det. Warmington told Perez to place his hands behind his back. Perez initially put his hands behind his head but then moved them behind his back. Det. M. Diaz approached and handcuffed Perez. I talked to Perez and he told me he was not injured and refused any medical treatment. I took photographs of Perez, which were placed into evidence.

11. Last Name: Perez 12. First: Miguel 13. Race: H 14. Sex: M

15. DOB: 2/1/83 16. Height: 5'07" 17. Weight: 190

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

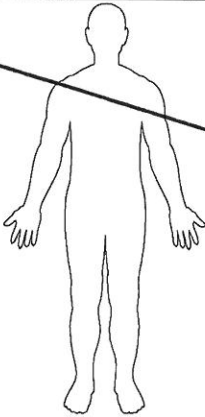
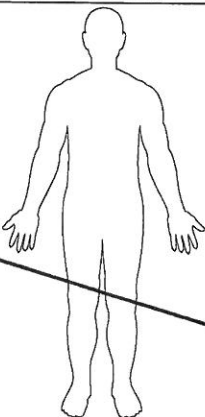
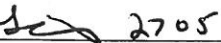

23. Anterior View

Posterior View

# Response to Resistance Report (continued)

Key West Police Department

Case No: 15-260

<b>OFFICER</b>	<b>24. Officer:</b> Scott Warmington				<b>25. Race:</b> W		<b>26. Sex:</b> M		<b>27. Age:</b> 26	
	<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> 3					
	<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 By: <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) N/A</b>										
<b>OFFICER</b>										
	<b>34. Anterior View</b>					<b>Posterior View</b>				
<b>TASER USE ONLY</b>	<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>									
	<b>38. Notified Date:</b> 1/14/15					<b>39. Time:</b> 1815				
	<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			Phone Number			
<b>SUPERVISOR'S INQUIRY</b>	<b>43. Is further review recommended:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS									
	SGT. B. LARIZ B.  2705					1/14/15				
	44. Preparing Supervisor's Signature / ID					45. Date				
<b>INT. AFF.</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)									
	 1679					1/19/15				
	47. Signature of Internal Affairs Inspector					48. Date				
<b>49. If section 46 is "No" record the Professional Standards Control Number:</b>										
<b>50. Date Entered:</b>										

# Response to Resistance Report (continued)

Key West Police Department

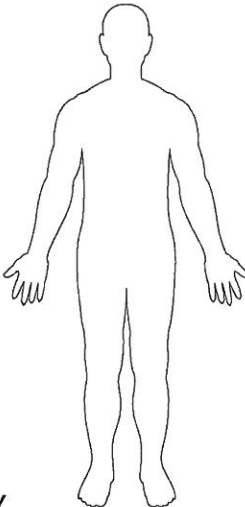
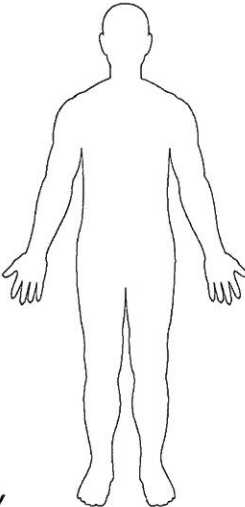
Case No: 15-260

INCIDENT	<b>51. Description (Section 10 continued):</b> There were no independent witnesses to interview. Post Miranda Perez did admit to me that he had been smoking marijuana.			
OFFICER	<div> <div>24. Officer:</div> <div>25. Race:</div> <div>26. Sex:</div> <div>27. Age:</div> </div> <div> <div>28. Duty Status:</div> <div>29. Yrs Exp:</div> </div> <div> <div>30. Injuries:</div> <div>31. Photographed:</div> <div>32. Treated:</div> <div>By:</div> </div> <div>33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)</div>			
	<div> <div>34. Anterior View</div> <div>Posterior View</div> </div>			
OFFICER	<div> <div>24. Officer:</div> <div>25. Race:</div> <div>26. Sex:</div> <div>27. Age:</div> </div> <div> <div>28. Duty Status:</div> <div>29. Yrs Exp:</div> </div> <div> <div>30. Injuries:</div> <div>31. Photographed:</div> <div>32. Treated:</div> <div>By:</div> </div> <div>33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)</div>			
	<div> <div>34. Anterior View</div> <div>Posterior View</div> </div>			

# Response to Resistance Report

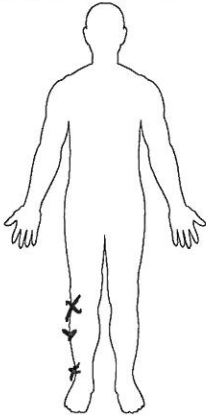
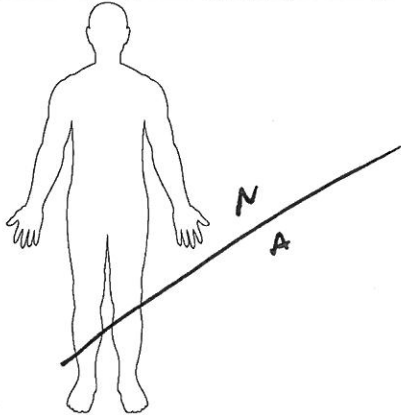
Key West Police Department

Case No: 15-0303

<b>1. A Response to Resistance Report will be completed by the supervisor for:</b> (Check all that apply)		
<input type="checkbox"/> A response through the use of non-lethal weapons,		
<input checked="" type="checkbox"/> Applies weaponless physical force of strikes, kicks, or "take-downs"		
<input type="checkbox"/> When any person sustains an apparent substantial or fatal injury as a result of the application of force		
<input type="checkbox"/> When any person complains of injury as a result of the application of force		
<input type="checkbox"/> Discharge of firearm in the line of duty off-duty or on-duty (other than for training, maintenance or ballistics testing)		
<b>2. Date:</b> 1/16/15 <b>3. Time:</b> 2354 <b>4. Location:</b> 917 Center Street <b>5. Incident type:</b> L and P Arrest		
<b>6. Resistance Level</b> <b>7. Explanation</b> <b>8. Response Option</b> <b>9. Explanation</b>		
<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	<b>10. Description of Incident:</b> (If additional space is needed, continue in section 51 or use separate page if needed) I was working an off duty detail and was requested by Sergeant Rodriguez to respond to the scene, regarding a Response to Resistance incident and also a Notice of Injury. Sergeant Pablo Rodriguez said, he responded to a call about a man jumping from roof to roof in the 900 Block of Simonton Street. Sergeant Rodriguez said he saw the subject on top of the roof at 907 Center Street. Sergeant Rodriguez requested other units respond to assist with this incident. The man who was later identified as Andrew Bell, jumped down from the roof and ran away from Sergeant Rodriguez, who was giving loud verbal commands to stop. Sergeant Rodriguez said he chased Bell who ran through the rear parking lot of the Wicker Guesthouse. Bell jumped over several parked cars, attempting to elude Sergeant Rodriguez. Officer Nelson saw Bell and also gave him loud verbal commands to stop.	
	<b>11. Last Name:</b> Bell <b>12. First:</b> Andrew <b>13. Race:</b> W <b>14. Sex:</b> M <b>15. DOB:</b> 10/10/1983 <b>16. Height:</b> 600 <b>17. Weight:</b> 200 <b>18. Did you observe the subject:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes      If NO, explain why in Section 5. If "YES", complete sections 19-23 <b>19. Appeared to be:</b> <input type="checkbox"/> Intoxicated <input checked="" type="checkbox"/> Under the influence of controlled substance <input checked="" type="checkbox"/> Emotionally / mentally disturbed <b>20. 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 23 ) <b>21. Photographed:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <b>22. 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 <input type="checkbox"/> Detention	
SUBJECT	<b>23. Anterior View</b> 	<b>Posterior View</b> 

## Key West Police Department

Case No: 15-0303

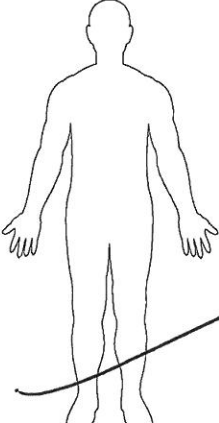
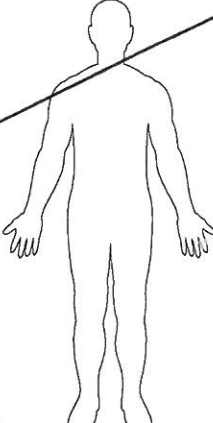
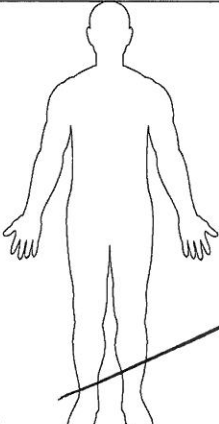
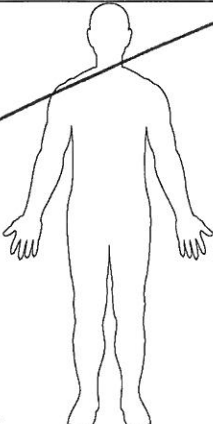
<b>OFFICER</b>	24. Officer: Pablo Rodriguez		25. Race: H		26. Sex: M		27. Age: 48	
	28. Duty Status: <input checked="" type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment		<input checked="" type="checkbox"/> Uniformed <input type="checkbox"/> Plain clothes		29. Yrs Exp: 15			
	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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes		By: <input type="checkbox"/> EMT/Paramedic on scene <input checked="" type="checkbox"/> Hospital			
33. Response option used by this officer: (If TASER®, also reference line number from TASER® section)								
<b>TASER USE ONLY</b>								
	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: 1/16/15				39. Time: 2354 hours			
	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		
Andre Olivier		9725 Robin Lane, New Orleans, LA			504-452-4045			
<b>INT. AFF.</b>	43. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				44. Preparing Supervisor's Signature / ID			
	FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS				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			
49. If section 46 is "No" record the Professional Standards Control Number:				50. Date Entered:				



# Response to Resistance Report (continued)

Key West Police Department

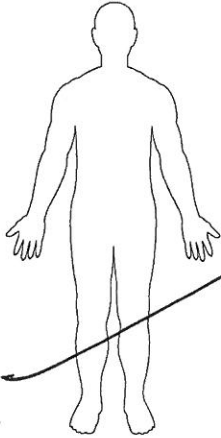
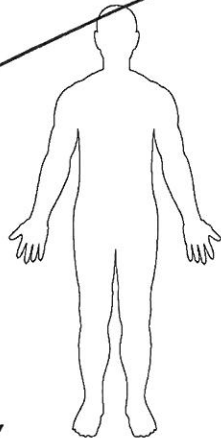
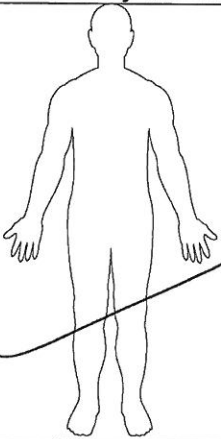
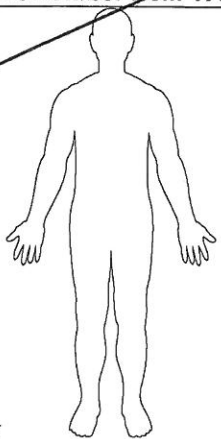
Case No: 15-0303

INCIDENT	<p><b>51. Description (Section 10 continued):</b>          Bell did not comply and ran into the side yard of 917 Center Street. Sergeant Rodriguez said he tackled Bell to the ground, gaining control of him and placed him under arrest for Loitering and Prowling and Resisting Arrest without Violence. I responded to the scene. Once on scene, I noticed Bell, sitting on the rear step of a Care Ambulance Truck. I asked Bell if he was injured. Bell said he has a broken right wrist, but it was not from this incident. Bell refused medical attention on scene. I took photographs of Bell, even though he did not have any injuries. Bell was then taken to the Monroe County Jail for processing, by Officer M. Hansell.</p>	
OFFICER	<p>24. Officer: _____ 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>	
	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  <p>34. Anterior View</p> </div> <div style="text-align: center;">  <p>Posterior View</p> </div> </div>	
OFFICER	<p>24. Officer: _____ 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>	
	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  <p>34. Anterior View</p> </div> <div style="text-align: center;">  <p>Posterior View</p> </div> </div>	

# Response to Resistance Report (continued)

Key West Police Department

Case No: 15-0303

INCIDENT	<b>51. Description (Section 10 continued):</b> During the take down, Sergeant Rodriguez sustained injury to his right knee, shin and ankle. When he landed onto the ground, his lower leg landed on jagged concrete. I took photographs of Sergeant Rodriguez' right lower leg area, where he sustained injury. All the photographs, were placed onto a disc and were entered into KWPD Property and Evidence by Officer M. Hansell. The following officers responded to the scene: T. Anglin, M. Andruzzi, N. Galbo, J. Young and J. Tellier. The only video available for this incident is from Officer M. Hansell's TASER. The video shows the subject on ground being handcuffed. There was no TASER deployment, only display video and audio. The Video was downloaded onto a CD and attached with this report.	
OFFICER	24. Officer: _____ 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)	
	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  <p>34. Anterior View</p> </div> <div style="text-align: center;">  <p>Posterior View</p> </div> </div>	
OFFICER	24. Officer: _____ 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)	
	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  <p>34. Anterior View</p> </div> <div style="text-align: center;">  <p>Posterior View</p> </div> </div>	

# Response to Resistance Report

Key West Police Department

Case No: 15-0411

## 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: 01/24/15 3. Time: 0220 4. Location: 200 Blk of Duval St 5. Incident type: Disorderly/RAWOV

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

- ☐ Passive:  
☒ Active: Kick/Pulled away/Ran  
☐ Aggressive:  
☐ Deadly Force:  
☐ Physical Control  
☒ Non-lethal Weapon TASER  
☐ Deadly Force

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

Officer Richardson responded to Rick's Bar regarding a subject fighting with the bouncer's. Seconds later, Officer Cutie broadcasted "1 TASED" and then a 2nd TASING". I immediately responded to the scene. Upon arrival, I saw a white male in the middle of the 200 Block of Duval Street, actively resisting Officer's Richardson, Cutie and Kasyanenko' attempt to handcuff him. I saw a large crowd forming on both sides of the street and requested more units. Once other Officer's arrived, I met with the involved officer's and the TASED subject Orion Jones. Officer Richardson provided a brief explanation as to his encounter with Jones. Officer Richardson encountered Jones, who was actively fighting with Rick's Bar security. Officer Richardson identified himself as a Key West Police Officer. The bar staff let loose of Jones. Jones began to run across Duval Street and Officer Cutie saw the subject running and went to assist. Jones fell to the ground. Both Officer Cutie and Richardson attempted to place Jones in handcuffs,

11. Last Name: Jones 12. First: Orion 13. Race: W 14. Sex: M

15. DOB: 01/18/1995 16. Height: 5'10" 17. Weight: 160 lbs

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

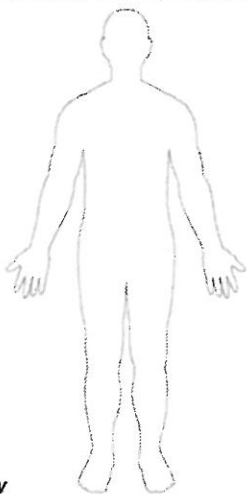
19. Appeared to be: ☒ Intoxicated ☐ Under the influence of controlled substance ☐ Emotionally / mentally disturbed

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

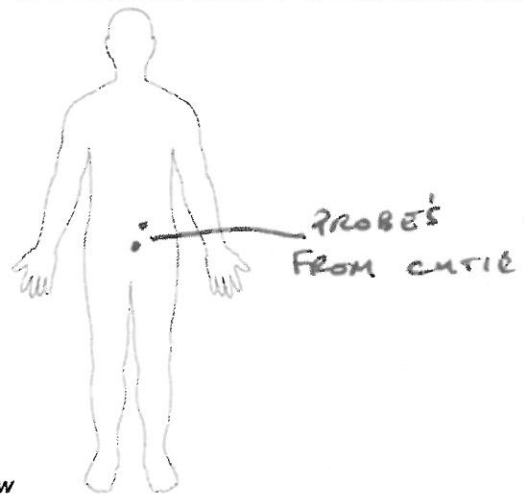
21. Photographed: ☐ No ☒ Yes 22. Treated: ☐ No ☒ Yes By: ☒ EMT/Paramedic on scene ☐ Hospital ☐ Detention

SUBJECT

23. Anterior View



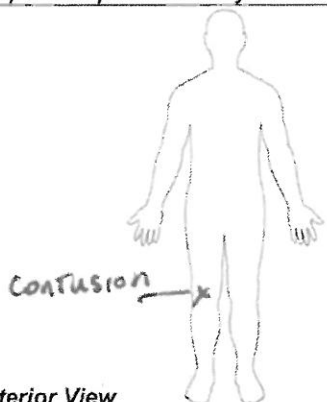
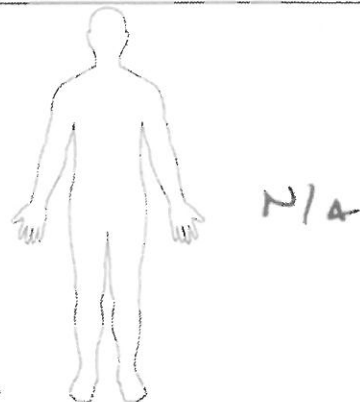
Posterior View



# Response to Resistance Report (continued)

Key West Police Department

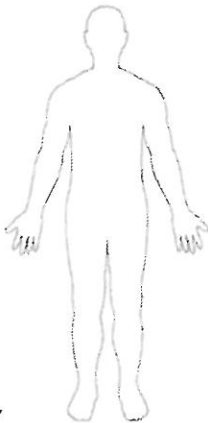
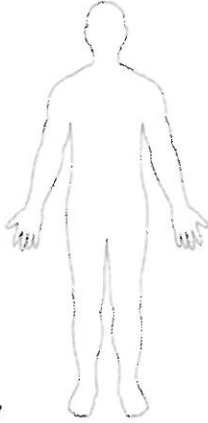
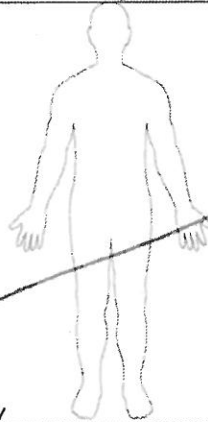
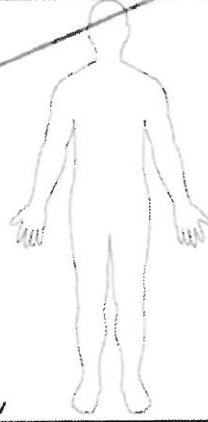
Case No: 15-0411

<b>OFFICER</b>	24. Officer: Edward Cutie			25. Race: W		26. Sex: M		27. Age: 25	
	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: 2			
	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			
<b>TASER USE ONLY</b>	33. Response option used by this officer: (If TASER®, also reference line number from TASER® section) 35								
									
<b>TASER USE ONLY</b>	35. TASER® device serial # X00-583613				36. TASER® device serial # X00-606219				
	TASER®Cam serial # V08-007100				TASER®Cam serial # V08-026710				
	Cartridge 1 serial # C4100M7H1				Cartridge 1 serial # C410ZN6AN				
	Cartridge 2 serial #				Cartridge 2 serial #				
	Number of cycles: 3				Number of cycles: 1				
	Type of contact: <input checked="" type="checkbox"/> Probe <input type="checkbox"/> COPS <input type="checkbox"/> Drive Stun				Type of contact: <input checked="" type="checkbox"/> Probe <input type="checkbox"/> COPS <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 checked="" type="checkbox"/> No				
	Target distance at probe launch: 6 Inches				Target distance at probe launch: 5 feet				
	Distance between probes: 2 Inches				Distance between probes: 3 feet				
	Probes removed by (name): RICHARDSON				Probes removed by (name): RICHARDSON				
Device downloaded by: SGT D BARRIOS				Device downloaded by: SGT D BARRIOS					
<b>SUPERVISOR'S INQUIRY</b>	<input type="checkbox"/> 37. Check and list any additional TASER® devices, cartridges or details in the incident description section.								
	38. Notified Date: 01/24/15				39. Time: 0221 hours				
	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		
	FRED BUSHEY			202 DUVAL STREET			305-942-1924		
<b>INT. AFF.</b>	43. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				SGT T O 1350		02/11/15		
	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)				[Signature] 1679		2/11/15		
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: 15-0411

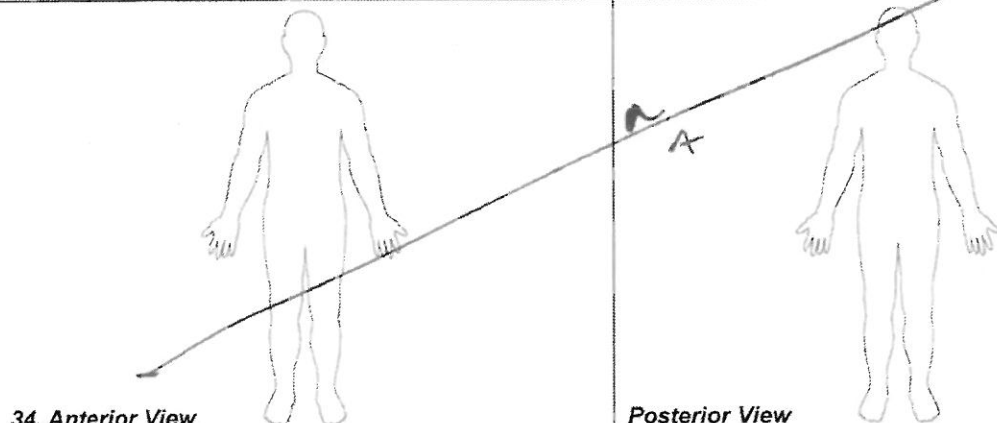
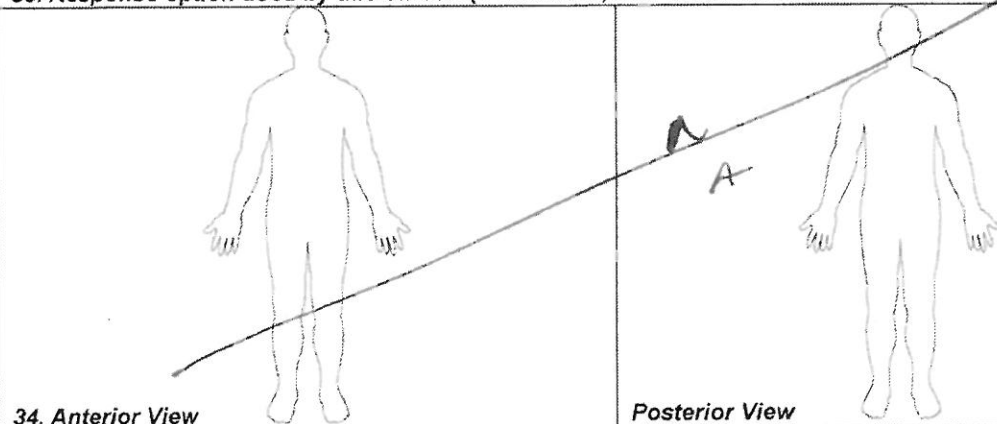
INCIDENT	<b>51. Description (Section 10 continued):</b> but Jones did not comply. Jones was kicking, pushing and rolling on the ground. Due to Jones actively resisting and the Officers being unable to gain control, Officer Cutie deployed his TASER. Both probes penetrated Jones' lower back area. Due to the close proximity and the limited probe spread, Nuero Muscular Incapacitation (NMI) was not complete, and Jones was able to get up and run away. Officer Cutie delivered (3) cycles, while Jones was on the ground and running away. Officer Richardson saw Jones' running away and he deployed his TASER from approximately 5 feet away, but the probes did not penetrate into the skin. Jones's immediately fell to the ground and was able to be handcuffed, after a brief struggle. Officer Richardson completed the probe removal.			
OFFICER	<b>24. Officer:</b> Curtiss Richardson <b>25. Race:</b> W <b>26. Sex:</b> M <b>27. Age:</b> 29 <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> 4 <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 ) <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:</b> (If TASER®, also reference line number from TASER® section) 36			
	 34. Anterior View		 Posterior View	
OFFICER	<b>24. Officer:</b> <b>25. Race:</b> <b>26. Sex:</b> <b>27. Age:</b> <b>29. Yrs Exp:</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>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:</b> (If TASER®, also reference line number from TASER® section)			
	 34. Anterior View		 Posterior View	



# Response to Resistance Report (continued)

Key West Police Department

Case No: 15-0411

INCIDENT	<b>51. Description (Section 10 continued):</b> I took photographs of the probe puncture wounds on Jones' lower back. Jones did have a bloody mouth, sustained from the altercation with the bouncers, and was not a result of the TASING. Jones did not complain of any injury as a result of the TASING. Jones was treated on scene by CARE Ambulance, before being transported to the Jail. Officer Cutie sustained a contusion/abrasion to his right knee, during the struggle on the ground. I completed a NOI and he refused medical treatment at this time. Officer Cutie recovered both cartridges and AFID'S from both TASERS and placed them into evidence. Officer's On Scene: Richardson, Cutie, Kasyanenko and Sgt. D. Barrios. Due to the Officers being on foot, there were no available In-Car videos.			
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: (If TASER®, also reference line number from TASER® section)</b>			
OFFICER				
	<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> _____			
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: (If TASER®, also reference line number from TASER® section)</b>			
OFFICER				
	<b>34. Anterior View</b> <b>Posterior View</b>			