

# Response to Resistance Report

Key West Police Department

Case No: 17-005547

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: 11/11/2017 3. Time: 13:30 4. Location: 1114 Truman Ave 5. Incident type: resisting

6. Resistance Level

7. Explanation

8. Response Option

9. Explanation

☐ Passive:

☒ Physical Control

wrist grab (See report)

☒ Active:

tensing/pulling away

☐ Non-lethal Weapon

☐ Aggressive:

☐ Deadly Force

☐ Deadly Force:

10. Last Name: Hinkley

11. First: Richard E.

12. Race: W

13. Sex: M

14. DOB: 07/13/1950

15. Height: 5'5"

16. Weight: 125

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

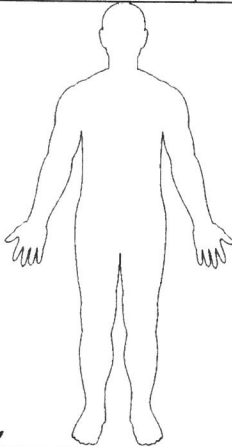
If NO, explain why in Section 42. If "YES", complete sections 18-22

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

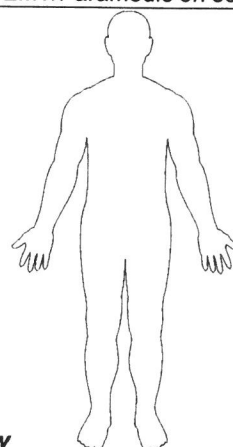
19. Injuries: ☐ No ☒ Evident ☐ Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 22)

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

SUBJECT



22. Anterior View



Posterior View

23. Officer: Michael Chaustit

24. Race: W

25. Sex: M

26. Age: 39

27. Height: 6'00"

28. Weight: 275

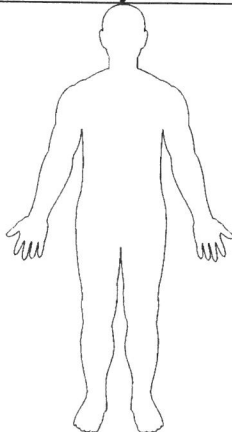
29. Duty Status: ☒ On-duty ☐ Off-duty ☐ Extra duty employment ☒ Uniformed ☐ Plain clothes 30. Yrs Exp: 10

31. Injuries: ☒ No ☐ Evident ☐ Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 35)

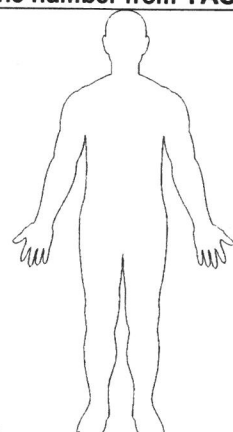
32. Photographed: ☒ No ☐ Yes 33. Treated: ☒ No ☐ Yes By: ☐ EMT/Paramedic on scene ☐ Hospital

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

OFFICER



35. Anterior View

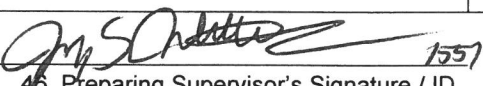



Posterior View

# Response to Resistance Report (continued)

Key West Police Department

Case No: 17-005547

|  |  |                            |   |              |
|--|--|----------------------------|---|--------------|
| TASER USE ONLY   | <b>36. TASER® device serial #</b>  |                            | <b>37. 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>38. Check and list any additional TASER® devices, cartridges or details in the incident description section.</b> |  |                            |   |              |
| REPORT   | <b>39. Offense/Incident Report and/or Warrant Affidavit must include:</b><br><input checked="" type="checkbox"/> All necessary criminal elements.<br><input checked="" type="checkbox"/> All details of the arrest<br><input checked="" type="checkbox"/> Details articulating the subject's words, mannerisms and actions that justify the use of force.<br><input checked="" type="checkbox"/> Details outlining the response to resistance utilized by each officer.<br><input checked="" type="checkbox"/> Detailed description of injury complaints and/or observed injuries<br><input checked="" type="checkbox"/> Details outlining the decontamination, first aid or medical treatment provided to the officer and/or subject. |                            |   |              |
|  |  |                            |   |              |
| SUPERVISOR'S INQUIRY   | <b>40. Notified Date:</b> 11/11/2017   |                            | <b>41. Time:</b> 13:30  |              |
|  | <b>42. Did you respond to the scene:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)  |                            |   |              |
|  |  |                            |   |              |
|  | <b>43. Did you meet with the Officer:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)   |                            |   |              |
|  |  |                            |   |              |
|  | <b>44. 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 |
|  |  |                            |   |              |
|  |  |                            |   |              |
|  |  |                            |   |              |
| INT. AFF.  | <b>45. Is further review recommended:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  |                            |  1557                         |              |
|  | FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS  |                            | 11/11/2017  |              |
|  |  |                            | 46. Preparing Supervisor's Signature / ID   |              |
|  |  |                            | 47. Date  |              |
| INT. AFF.  | <b>48. 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 51)   |                            |  2935                         |              |
|  |  |                            | 49. Signature of Internal Affairs Inspector   |              |
| 51. If section 48 is "No" record the Professional Standards Control Number:  |  | 52. Date Entered: 12/18/17 |   |              |
|  |  | 50. Date                   |   |              |



## INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 17-005547

| Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found |     |        |          |              |                |                           |
|---|-----|--------|----------|--------------|----------------|---------------------------|
| D<br>R<br>U<br>G<br>S   | UCR | Status | Quantity | Type Measure | Suspected Type | Up to 3 types of activity |
|   |     |        |          |              |                |                           |
|   |     |        |          |              |                |                           |
|   |     |        |          |              |                |                           |
|   |     |        |          |              |                |                           |
|   |     |        |          |              |                |                           |
|   |     |        |          |              |                |                           |
|   |     |        |          |              |                |                           |
|   |     |        |          |              |                |                           |
|   |     |        |          |              |                |                           |

Assisting Officers  
WILLIAMSON, J. (1557), STEVENS, T.R. (2609)

Suspect Hate / Bias Motivated:

## INCIDENT/INVESTIGATION REPORT

Narr. (cont.) OCA: 17-005547

Key West Police Department

|           |
|-----------|
| NARRATIVE |
|-----------|

**REPORTING OFFICER NARRATIVE***Key West Police Department*

|                   |                                   |  |
|-------------------|-----------------------------------|--|
|                   |                                   | OCA<br>17-005547                             |
| Victim<br>Society | Offense<br>OBSTRUCTION OF JUSTICE | Date / Time Reported<br>Sat 11/11/2017 13:30 |

On November 11, 2017, I responded to 1114 Truman Avenue, in reference to an intoxicated person.

I arrived and met with Ms. Jenifer the owner of Jolie Boutique and an intoxicated male, identified as Richard Hinkley. Jenifer stated that vagrants have taken over the corner of Truman Avenue and Varella Street. Jenifer said she constantly has to tell the vagrants to leave the front of her store so she can operate her business. Jenifer said Hinkley had fallen over several times and was obstructing the sidewalk in front of her business.

Hinkley was unbalanced, had a flushed face, and slurred speech. Due to my observations and the statements made by Jenifer, I was going to take Hinkley into protective custody due to his intoxication. I told Hinkley to place his hands behind his back and he did not comply. I grabbed onto his left wrist to handcuff him. Hinkley tensed his arm pulled away from me and stated he was not going to jail. Hinkley continued to pull away and tense his body in an intentional act to prevent me from performing my lawful duty. Due to Hinkley's active physical resistance, I pulled Hinkley's left wrist towards the ground which caused him to fall to the ground. When Hinkley fell to the ground his head hit the sidewalk and he had a small laceration on the top of his head. Once Hinkley was on the ground I handcuffed him. I picked Hinkley up and walked him to my marked patrol car. I placed him into the rear of my marked patrol car. KWFD Rescue was requested to respond to the scene to evaluate Hinkley's injury. KWFD Rescue evaluated and treated Hinkley's injury. Sgt. Williamson arrived at the scene and photographed Hinkley and his injury from this incident.

Hinkley did knowingly and intentionally resist my efforts to execute my lawful duty without violence which is in violation of F.S. 843.02. Hinkley was transported to MCDC for processing without further incident.

NOTE: I activated my BWC at the beginning of this incident, however, when the incident was over I noticed the light on the top of my BWC was red indicating it was malfunctioning.

# Incident Report Suspect List

Key West Police Department

OCA: 17-005547

|   |   |                  |                  |                 |                 |               |                   |                    |                   |                    |   |  |                                |  |             |  |      |     |     |        |  |        |  |     |              |         |      |  |       |  |       |  |         |               |  |                |                  |  |     |       |  |       |  |        |  |     |  |  |
|---|---|------------------|------------------|-----------------|-----------------|---------------|-------------------|--------------------|-------------------|--------------------|---|--|--------------------------------|--|-------------|--|------|-----|-----|--------|--|--------|--|-----|--------------|---------|------|--|-------|--|-------|--|---------|---------------|--|----------------|------------------|--|-----|-------|--|-------|--|--------|--|-----|--|--|
| 1   | Name (Last, First, Middle)<br><i>HINKLEY, RICHARD E</i> |                  |                  |                 |                 |               | Also Known As     |                    |                   |                    | Home Address<br><i>GEN DELIVERY<br/>KEY WEST, FL 33040<br/>305-296-3299</i> |  |                                |  |             |  |      |     |     |        |  |        |  |     |              |         |      |  |       |  |       |  |         |               |  |                |                  |  |     |       |  |       |  |        |  |     |  |  |
|   | Business Address <i>NONE, UNEMPLOYED</i>                |                  |                  |                 |                 |               |                   |                    |                   |                    |   |  |                                |  |             |  |      |     |     |        |  |        |  |     |              |         |      |  |       |  |       |  |         |               |  |                |                  |  |     |       |  |       |  |        |  |     |  |  |
|   | DOB<br><i>07/13/1950</i>                                | Age<br><i>67</i> | Race<br><i>W</i> | Sex<br><i>M</i> | Eth<br><i>N</i> | Hgt           | Wgt<br><i>125</i> | Hair<br><i>BRO</i> | Eye<br><i>HAZ</i> | Skin<br><i>DRK</i> | Driver's License / State.<br><i>H524740502530 FL</i>                        |  |                                |  |             |  |      |     |     |        |  |        |  |     |              |         |      |  |       |  |       |  |         |               |  |                |                  |  |     |       |  |       |  |        |  |     |  |  |
|   | Scars, Marks, Tattoos, or other distinguishing features |                  |                  |                 |                 |               |                   |                    |                   |                    |   |  |                                |  |             |  |      |     |     |        |  |        |  |     |              |         |      |  |       |  |       |  |         |               |  |                |                  |  |     |       |  |       |  |        |  |     |  |  |
| <table border="1"> <tr> <td colspan="2"><i>Reported Suspect Detail</i></td> <td colspan="2">Suspect Age</td> <td>Race</td> <td>Sex</td> <td>Eth</td> <td colspan="2">Height</td> <td colspan="2">Weight</td> <td>SSN</td> </tr> <tr> <td>Weapon, Type</td> <td>Feature</td> <td colspan="2">Make</td> <td colspan="2">Model</td> <td colspan="2">Color</td> <td>Caliber</td> <td colspan="2">Dir of Travel</td> <td>Mode of Travel</td> </tr> <tr> <td colspan="2">VehYr/Make/Model</td> <td>Drs</td> <td colspan="2">Style</td> <td colspan="2">Color</td> <td colspan="2">Lic/St</td> <td colspan="3">VIN</td> </tr> </table> |   |                  |                  |                 |                 |               |                   |                    |                   |                    |   |  | <i>Reported Suspect Detail</i> |  | Suspect Age |  | Race | Sex | Eth | Height |  | Weight |  | SSN | Weapon, Type | Feature | Make |  | Model |  | Color |  | Caliber | Dir of Travel |  | Mode of Travel | VehYr/Make/Model |  | Drs | Style |  | Color |  | Lic/St |  | VIN |  |  |
| <i>Reported Suspect Detail</i>  |   | Suspect Age      |                  | Race            | Sex             | Eth           | Height            |                    | Weight            |                    | SSN   |  |                                |  |             |  |      |     |     |        |  |        |  |     |              |         |      |  |       |  |       |  |         |               |  |                |                  |  |     |       |  |       |  |        |  |     |  |  |
| Weapon, Type  | Feature   | Make             |                  | Model           |                 | Color         |                   | Caliber            | Dir of Travel     |                    | Mode of Travel  |  |                                |  |             |  |      |     |     |        |  |        |  |     |              |         |      |  |       |  |       |  |         |               |  |                |                  |  |     |       |  |       |  |        |  |     |  |  |
| VehYr/Make/Model  |   | Drs              | Style            |                 | Color           |               | Lic/St            |                    | VIN               |                    |   |  |                                |  |             |  |      |     |     |        |  |        |  |     |              |         |      |  |       |  |       |  |         |               |  |                |                  |  |     |       |  |       |  |        |  |     |  |  |
| Notes   |   |                  |                  |                 |                 | Physical Char |                   |                    |                   |                    |   |  |                                |  |             |  |      |     |     |        |  |        |  |     |              |         |      |  |       |  |       |  |         |               |  |                |                  |  |     |       |  |       |  |        |  |     |  |  |

# Monroe County Adult Arrest Form

☒ ARREST  
☐ WARRANT  
☐ COMPLAINT AFFIDAVIT

KEY WEST PD

ARREST #

OBTS #

|   |          |                     |                 |   |             |                                |             |  |                   |  |                          |
|---|----------|---------------------|-----------------|---|-------------|--------------------------------|-------------|--|-------------------|--|--------------------------|
| Filing Agency<br>KEY WEST PD                              |          | Case #<br>17-005547 |                 | Doc. Control #  |             | State ID #                     |             | FBI  |                   | SS #   |                          |
| Defendant's Last Name<br>HINKLEY                          |          |                     |                 | First<br>RICHARD  |             | Middle<br>E                    |             | SUF  |                   | Alias<br>Citizenship   |                          |
| Race<br>W   | Eth<br>N | Sex<br>M            | Hgt             | Eyes<br>HAZ   | Hair<br>BRO | Wgt<br>125                     | Comp<br>DRK | Age<br>67                                  | DOB<br>07/13/1950 | Birthplace<br>NY   | Scars, Marks, TT         |
| Facial Hair<br>STUBBLE                                    |          | Build<br>SLIM/THI   | Marital St      | Hand Use  |             | Glasses                        | Speech      |  | Parole/Probation  | Language Spoken  |                          |
| Permanent Address<br>GEN DELIVERY, KEY WEST, FL 33040     |          |                     |                 |   |             |                                |             | Phone (Home):<br>(305) 296-3299            |                   | Local Address:   |                          |
| Email Address   |          |                     |                 |   |             |                                |             | Phone (Cell):                              |                   | Place of Employment<br>NONE  | Occupation<br>UNEMPLOYED |
| Arrest Location<br>1114 TRUMAN AVE                        |          |                     |                 |   |             | Area/ <input type="checkbox"/> |             | Phone (Work):                              |                   | Arresting Officer<br>CHAUSTIT, MICHAEL (3141)  |                          |
| Violation Location<br>1114 TRUMAN AVE, KEY WEST, FL 33040 |          |                     |                 |   |             | Area/ <input type="checkbox"/> |             | Date/Time of Violation<br>11/11/2017 13:30 |                   | Date/Time Arrested<br>11/11/2017 14:23   |                          |
| DL #<br>H524740502530                                     |          | State<br>FL         | Breathalyzer By |   | Reading     | Miranda Advisement             |             | By Whom?                                   |                   | Indication of: Y N UK  |                          |
| Domestic Violence   |          | Weapon Seized       |                 | Officer Injured?  |             | Language Spoken?               |             | Caution                                    |                   | Alcohol Influence: <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |                          |
| Drug Type:  |          | Type:               |                 | B-Barbiturate H-Hallucinogen P-Paraphernalia/ U-Unknown |             | Activity:                      |             | Activity:                                  |                   | K-Dispense/ Distribute   |                          |
|   |          |                     |                 | N-N/A C-Cocaine M-Marijuana Equipment Z-Other           |             |                                |             |  |                   |  |                          |
|   |          |                     |                 | A-Amphetamine E-Heroin O-Opium S-Synthetic              |             |                                |             |  |                   |  |                          |

|                           |       |                               |                         |                             |
|---------------------------|-------|-------------------------------|-------------------------|-----------------------------|
| Defendant's Vehicle Make: | Type: | Year:                         | Color:                  | Vehicle Registration State: |
| VIN #                     | Tag # |                               | Vehicle Tag Expiration: |                             |
| Vehicle Status:           |       | Other identifiers or remarks: |                         |                             |

# CODEFENDANT: ADDRESS PHONE # RACE SEX DOB

| COUNT | OFFENSES CHARGE                        | Statute | Warrant # | Court Date and Time | Citation # |
|-------|--|---------|-----------|---------------------|------------|
| 1/M   | RESIST / OBSTRUCT OFFICER W/O VIOLENCE | 843.02  |           |                     |            |
|       |  |         |           |                     |            |
|       |  |         |           |                     |            |
|       |  |         |           |                     |            |
|       |  |         |           |                     |            |

Before me this date personally appeared who being first duly sworn deposes and says that on the 11st day of November, 2017

at 1114 TRUMAN AVE, KEY WEST, FL 33040

the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows

On November 11, 2017, I responded to 1114 Truman Avenue, in reference to an intoxicated person.

I arrived and met with Ms. Jenifer the owner of Jolie Boutique and an intoxicated male, identified as Richard Hinkley. Jenifer stated that vagrants have taken over the corner of Truman Avenue and Varella Street. Jenifer said she constantly has to tell the vagrants to leave the

I swear the above statement is correct and true to the best of my knowledge and belief.

OFFICER/ELECTRONIC SIGNATURE

APPROVING SUPERVISOR

DIVISION / UNIT

STATE OF FLORIDA COUNTY OF MONROE

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, (year) \_\_\_\_\_, who is personally known to me or who has produced (ID Type) Police as identification and who DID take an oath.

SIXTEENTH JUDICIAL COURT  
MONROE County  
State of FLORIDA



# Monroe County Adult Arrest Form

KEY WEST PD  
ARREST #

OBTS # \_\_\_\_\_

front of her store so she can operate her business. Jenifer said Hinkley had fallen over several times and was obstructing the sidewalk in front of her business.

Hinkley was unbalanced, had a flushed face, and slurred speech. Due to my observations and the statements made by Jenifer, I was going to take Hinkley into protective custody due to his intoxication. I told Hinkley to place his hands behind his back and he did not comply. I grabbed onto his left wrist to handcuff him. Hinkley tensed his arm pulled away from me and stated he was not going to jail. Hinkley continued to pull away and tense his body in an intentional act to prevent me from performing my lawful duty. Due to Hinkley's active physical resistance, I took Hinkley to the ground and handcuffed him. I picked Hinkley up and walked him to my marked patrol car. I placed him into the rear of my marked patrol car.

Hinkley did knowingly and intentionally resist my efforts to execute my lawful duty without violence which is in violation of F.S. 843.02. Hinkley was transported to MCDCC for processing without further incident.

I swear the above statement is correct and true to the best of my knowledge and belief.

\_\_\_\_\_  
OFFICER/ELECTRONIC SIGNATURE

\_\_\_\_\_  
APPROVING SUPERVISOR

\_\_\_\_\_  
DIVISION / UNIT

STATE OF FLORIDA COUNTY OF MONROE

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, (year) \_\_\_\_\_, who is personally known to me or who has produced (ID Type) Police as identification and who DID take an oath.

SIXTEENTH JUDICIAL COURT  
MONROE County  
State of FLORIDA