

Response to Resistance Report

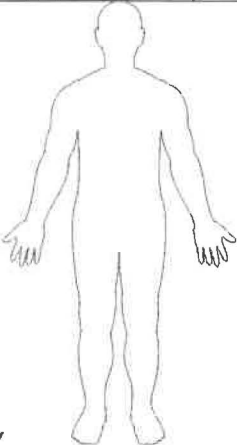
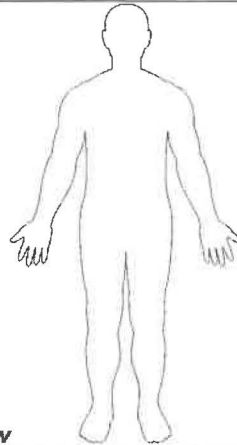
Key West Police Department

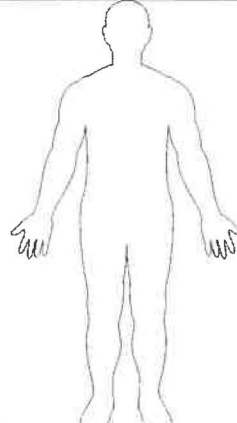
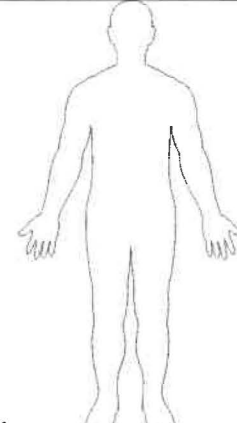
Case No: 19-4131

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: 07/06/2019 | 3. Time: 2250hrs | 4. Location: 1107 Duval Street | 5. Incident type: Intoxicated Person |
|--|---|-----------------------|---|--------------------------------------|
| | 6. Resistance Level | 7. Explanation | 8. Response Option | 9. Explanation |
| | <input checked="" type="checkbox"/> Passive: | Non-Compliant | <input checked="" type="checkbox"/> Physical Control | Joint Manipulation |
| | <input checked="" type="checkbox"/> Active: | Pulling Away, Bracing | <input checked="" type="checkbox"/> Non-lethal Weapon | Drive Stun |
| | <input checked="" type="checkbox"/> Aggressive: | Swinging at Officers | <input type="checkbox"/> Deadly Force | |
| <input type="checkbox"/> Deadly Force: | | | | |

| SUBJECT | 10. Last Name: Phelps | 11. First: Clayton | 12. Race: White | 13. Sex: Male |
|-------------------|---|--------------------|---|---------------|
| | 14. DOB: 03/04/1998 | 15. Height: 6'02 | 16. Weight: | |
| | 17. Did you observe the subject: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If NO, explain why in Section 42. If "YES", complete sections 18-22 | | | |
| | 18. Appeared to be: <input checked="" type="checkbox"/> Intoxicated <input type="checkbox"/> Under the influence of controlled substance <input type="checkbox"/> Emotionally / mentally disturbed | | | |
| | 19. 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 22) | | | |
| | 20. Photographed: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes 21. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital <input type="checkbox"/> Detention | | | |
| |  | |  | |
| 22. Anterior View | | Posterior View | | |

| OFFICER | 23. Officer: Santiago Perez | 24. Race: H | 25. Sex: M | 26. Age: 55 | 27. Height: 5'-9" | 28. Weight: 215 |
|---|--|--|------------|-------------|-------------------|-----------------|
| | 29. 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 30. Yrs Exp: 1.5 | | | | | |
| | 31. 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 35) | | | | | |
| | 32. Photographed: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes 33. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital | | | | | |
| | 34. Response option used by this officer: (If TASER®, also reference line number from TASER® section) 37 | | | | | |
|  | |  | | | | |
| 35. Anterior View | | Posterior View | | | | |

Response to Resistance Report (continued)

Key West Police Department

Case No: 19-4131

| | | |
|---|---|---|
| TASER USE ONLY | 36. TASER® device serial # X120056T7 | 37. TASER® device serial # |
| | TASER®Cam serial # V21001KP7 | TASER®Cam serial # |
| | Cartridge 1 serial # | Cartridge 1 serial # |
| | Cartridge 2 serial # | Cartridge 2 serial # |
| | Number of cycles: 1 | Number of cycles: |
| | Type of contact: <input type="checkbox"/> Probe <input type="checkbox"/> CODS <input checked="" 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: Sgt. F. Carter Sims | Device downloaded by: |
| | <input type="checkbox"/> 38. Check and list any additional TASER® devices, cartridges or details in the incident description section. | |
| REPORT | 39. Offense/Incident Report and/or Warrant Affidavit must include: <input checked="" type="checkbox"/> All necessary criminal elements. <input checked="" type="checkbox"/> All details of the arrest <input checked="" type="checkbox"/> Details articulating the subject's words, mannerisms and actions that justify the use of force. <input checked="" type="checkbox"/> Details outlining the response to resistance utilized by each officer. <input checked="" type="checkbox"/> Detailed description of injury complaints and/or observed injuries <input checked="" type="checkbox"/> Details outlining the decontamination, first aid or medical treatment provided to the officer and/or subject. | |
| | 40. Notified Date: 07/06/2019 41. Time: 2250 | |
| SUPERVISOR'S INQUIRY | 42. Did you respond to the scene: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why) | |
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| | | |
| | 43. Did you meet with the Officer: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why) | |
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| | | |
| INT. AFF. | 44. 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 |
| | | |
| | | |
| | | |
| 45. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS | | |
| 46. Preparing Supervisor's Signature / ID 3022 07/07/2019 47. Date | | |
| 48. 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 51) | | |
| 49. Signature of Internal Affairs Inspector 7/23/19 50. Date | | |
| 51. If section 48 is "No" record the Professional Standards Control Number: 52. Date Entered: | | |

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AINCIDENT/INVESTIGATION
REPORT

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|--|--|---|----------------------------|
| Agency Name Key West Police Department | | Case# 19-004131 | |
| ORI FL0440100 | | Date / Time Reported 07/06/2019 22:40 Sat | |
| Location of Incident 1107 Duval St, Key West FL 33040- | | Premise Type Highway / Street / Road/ | Beat/GP B2, GPB2 |
| Crime Incident(s) (Com) Resist Arrest / Escape XOM | | Last Known Secure 07/06/2019 22:40 Sat | |
| Crime Incident (Com) Ordinance Violation XOP | | At Found 07/06/2019 22:40 Sat | |
| Crime Incident () | | Activity | |
| Weapon / Tools NOT APPLICABLE/NONE | | Entry Exit Security | |
| Weapon / Tools | | Entry Exit Security | |
| Weapon / Tools | | Entry Exit Security | |

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|--|---|-------|-----------------------------|---------------------------------|-------------------|----------------|--------------------|---------------------------------------|-------------------------------|------------------------|
| # of Victims | 1 | Type: | SOCIETY/PUBLIC/STATE | | | Injury: | Domestic: N | | | |
| V1 | Victim/Business Name (Last, First, Middle) STATE OF FLORIDA | | | Victim of Crime # 1,2 | DOB Age | Race | Sex | Relationship To Offender ST | Resident Status N/A | Military Branch/Status |
| Home Address | | | | | | | | Home Phone | | |
| Employer Name/Address KEY WEST POLICE DEPT | | | | | | Business Phone | | Mobile Phone | | |
| VYR | Make | Model | Style | Color | Lic/Lis | VIN | | | | |

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| CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim) | | | | | | | | | | |
| Type: | | | | | Injury: | | | | | |
| Code | Name (Last, First, Middle) | | | Victim of Crime # | DOB Age | Race | Sex | Relationship To Offender | Resident Status | Military Branch/Status |
| Home Address | | | | | | | | Home Phone | | |
| Employer Name/Address | | | | | | Business Phone | | Mobile Phone | | |
| Type: | | | | | Injury: | | | | | |
| Code | Name (Last, First, Middle) | | | Victim of Crime # | DOB Age | Race | Sex | Relationship To Offender | Resident Status | Military Branch/Status |
| Home Address | | | | | | | | Home Phone | | |
| Employer Name/Address | | | | | | Business Phone | | Mobile Phone | | |

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|---|-----------------------|--------------|--------|----|---|----------------------|---|---------------|--------|--|
| L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found ("OJ" = Recovered for Other Jurisdiction) | | | | | | | | | | |
| VI # | Code | Status Fm/To | Value | OJ | QTY | Property Description | Make/Model | Serial Number | | |
| | 35 | EVID | \$0.00 | | 1 | BWC/3917 | | | | |
| Officer/ID# ARGUELLO, VICTOR S (3917) | | | | | | | | | | |
| Invest ID# (0) | | | | | | | Supervisor SIMS, FRED CARTER (2301) | | | |
| Status | Complainant Signature | | | | Case Status <i>Cleared By Arrest</i> | | Case Disposition: <i>Cleared By Arrest</i> | | Page 1 | |

INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 19-004131

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

| D R U G S | UCR | Status | Quantity | Type Measure | Suspected Type | Up to 3 types of activity |
|-----------------------|-----|--------|----------|--------------|----------------|---------------------------|
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Assisting Officers
PEREZ, S. (3834)

Suspect Hate / Bias Motivated:

NARRATIVE

REPORTING OFFICER NARRATIVE*Key West Police Department*

OCA

19-004131

Victim

STATE OF FLORIDA

Offense

RESIST ARREST / ESCAPE

Date / Time Reported

Sat 07/06/2019 22:40

On Saturday, July 6, 2019 at approximately 2240 hours, Ofc. Perez and I (Ofc. Arguello) were dispatched to 1102-A Duval Street, reference a male (later identified as Clayton Phelps, DOB 3/4/98) sleeping on the sidewalk.

Upon arrival, I noticed Phelps laying in front of 1107 Duval Street across the sidewalk. I noticed about four pedestrian walking around Phelps to get through the sidewalk. Phelps was laying face down, Ofc. Perez turned him around in attempt to wake him up. Phelps was sweating and was not responding to Ofc. Perez's order to "wake up. Ofc. Perez attempted to wake Phelps up by performing a sternum rub. Phelps become alert and slapped Ofc. Perez hand. Ofc. Perez and I Introduced ourselves as "Key West Police" (It should be noted that Ofc. Perez and I were wearing our KWPD class B uniforms, immediately recognizable as police officers). Phelps went back to sleep and ignored our commands to get up. Ofc. Perez gave Phelps a second sternum rub. Phelps aggressively attempted to get up, I ordered him to stay down but he refused. Phelps smelled of alcohol and had bloodshot eyes. I grabbed Phelps left arm and announced myself as "Key West Police" again. Phelps stated, "turn fucking loose of me right now". I ordered Phelps to stop resisting, he continued to pull away. Ofc. Perez told Phelps to stop resisting or he was going to get tasered, he continued to pull away. I ordered Phelps to put his hands behind, he refused. Ofc. Perez drive stunned Phelps on his upper right chest area. Phelps moved his body forward and took me with his momentum, since I was grabbing his arm. I fell on my left knee and had a small laceration. Phelps began yelling, "Motherfucker, would you let go off me!". Phelps continued to resist. I displayed my taser on Phelps and told him that he was going to get tasered if he didn't place his hands behind his back. Phelps complied and Ofc. Perez placed him in handcuff.

Based on the facts, evidence and my direct observation there is probable cause to believe on 7/6/19 at about 2240 hours Clayton Phelps obstructed the sidewalk from normal passage of pedestrians. I witnessed pedestrian stopping and walking around Phelps which is a Key west city Ordinance violation MOV 62-2.

Based on the facts, evidence and my direct observation there is probable cause to believe on 7/6/19 at about 2240 hours Clayton Phelps resisted by pulling away and refusing to follow Ofc. Perez and my commands while we were executing a legal investigation, which is a violation of Florida State Statute 843.02.

I transported Phelps to the Monroe County Detention Center. On the way to the Monroe County Detention Center, Phelps stated that he did what he did but wanted to apologize. This incident was recorded on my BWC.

Incident Report Suspect List

Key West Police Department

OCA: 19-004131

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|---|--|------------------|------------------|-----------------|-----------------|-------------------|-------------------|--------------------|-------------------|--------------------|---|--|--|--|--------------------------------|---------------|-------------|--|------|-----|-----|--------|--|--------|--|-----|--|--|--------------|--|--|--|------|--|-------|--|-------|--|---------|---------------|--|--|--|--|--|--|--|--|--|--|--|--|--|----------------|--|--|-------------------|--|--|--|-----|-------|--|-------|--|--------|--|-----|--|--|
| 1 | Name (Last, First, Middle) <i>PHELPS, CLAYTON CABELL</i> | | | | | Also Known As | | | | | Home Address <i>3300 SANDGULLY DR MELBOURNE, FL 32912 321-355-8290</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Business Address <i>UNKNOWN</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | DOB <i>03/04/1998</i> | Age <i>21</i> | Race <i>W</i> | Sex <i>M</i> | Eth <i>N</i> | Hgt <i>602</i> | Wgt <i>200</i> | Hair <i>BLN</i> | Eye <i>GRN</i> | Skin <i>LGT</i> | Driver's License / State. <i>P412103980840 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 colspan="3">SSN</td> </tr> <tr> <td colspan="2">Weapon, Type</td> <td colspan="2">Feature</td> <td colspan="2">Make</td> <td colspan="2">Model</td> <td colspan="2">Color</td> <td>Caliber</td> <td colspan="3">Dir of Travel</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td></td> <td colspan="3">Mode of Travel</td> </tr> <tr> <td colspan="4">Veh Yr/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 | | | Veh Yr/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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Veh Yr/Make/Model | | | | Drs | Style | | Color | | Lic/St | | VIN | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>Notes</td> <td colspan="14">Physical Char</td> </tr> <tr> <td></td> <td colspan="14"> <i>BUILD / MEDIUM, VERAGE FACIAL HAIR, NO FACIAL HAIR HAIR TYPE, MEDIUM HAIRSTYLE, STRAIGHT SPEECH, NORMAL</i> </td> </tr> </table> | | | | | | | | | | | | | | | Notes | Physical Char | | | | | | | | | | | | | | | <i>BUILD / MEDIUM, VERAGE FACIAL HAIR, NO FACIAL HAIR HAIR TYPE, MEDIUM HAIRSTYLE, STRAIGHT SPEECH, NORMAL</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Notes | Physical Char | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Incident Report Related Property List

Key West Police Department

OCA: 19-004131

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|---|--|---------------------------|------------------------|---------|---------------------|-------|--------------------------------|---------|-----|
| 1 | Property Description BWC/3917 | | | Make | | Model | | Caliber | |
| | Color | Serial No. | Value \$0.00 | | Qty 1.000 | Unit | Jurisdiction Locally | | |
| | Status Evidence | Date 07/07/2019 | NIC # | State # | Local # | | OAN | | |
| | Name (Last, First, Middle) * No name * | | | | DOB | | Age | Race | Sex |

Notes

CASE SUPPLEMENTAL REPORT

Printed: 08/12/2019 10:26

Key West Police Department

OCA: **19004131**

THE INFORMATION BELOW IS CONFIDENTIAL - FOR USE BY AUTHORIZED PERSONNEL ONLY

Case Status: *CLEARED BY ARREST***Case Mng Status:** *NA***Occurred:** *07/06/2019***Offense:** *RESIST ARREST / ESCAPE***Investigator:** *PEREZ, SANTIAGO (3834)***Date / Time:** *07/06/2019 23:12:11, Saturday***Supervisor:** *SIMS, FRED CARTER (2301)***Supervisor Review Date / Time:** *07/07/2019 00:18:51, Sunday***Contact:****Reference:** *General Supplemental Report*

On Saturday, July 06, 2019, approximately 2241 Hours I, Officer Perez was dispatched to 1107 Duval Street to assist Officer Arguelo, reference a male passed out on the sidewalk.

Upon arrival, I found a white male laying on the sidewalk face down. I introduced myself as Key West Police Officer. I was wearing my KWPD Class B uniform and readily recognizable as a police officer. Officer Arguelo arrived on scene. I gave the male several verbal commands to wake up, I kept introducing myself as a Key West Police Officer.

The male did not respond to my commands. I proceeded to grab his right shoulder and his right hip and rolled him right side up. I then did a sternum rub with my knuckles on the male's chest. The white male responded in an aggressive manner. He sat up and swung at me but did not hit me.

Officer Arguelo grabbed the subject's left hand to handcuff him. The subject resisted by tensing and pulled away from Officer Arguelo. I grabbed the subject's left hand and he also resisted by tensing and pulling away from me. Officer Arguelo and I gave the subject several verbal commands to stop resisting and to place his hands behind his back.

I pulled out my Taser and removed the Taser cartridge. I continued to give the subject verbal commands to stop resisting and to place his hands behind his back or I would Taser him. The subject ignored our lawful commands. I drive stunned the subject on the right side of his chest. The subject stopped resisting immediately. Officer Arguelo pull out his Taser, pointed at the subject while I placed him in handcuffed. I had no further involvement in this case. My BWC was activated through this encounter.///END OF REPORT///

Investigator Signature

Supervisor Signature