

# Response to Resistance Report

Key West Police Department

Case No: 20-1371

## 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

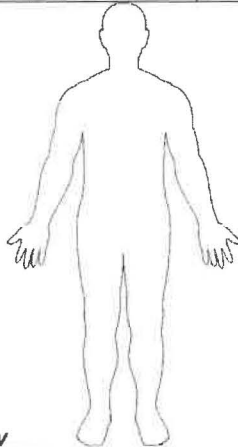
2. Date: 03.02.2020 3. Time: 2335 PM 4. Location: Charles / Duval 5. Incident type: S36B/Resisting

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

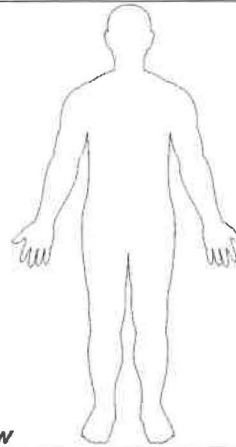
- ☒ Passive: Throwing Hands Aggressively ☒ Physical Control Take Down  
☒ Active: Tensing / Pulling Away / Bracing ☐ Non-lethal Weapon  
☐ Aggressive: ☐ Deadly Force  
☐ Deadly Force:

SUBJECT

10. Last Name: Broder 11. First: Patrick 12. Race: W 13. Sex: M  
14. DOB: 08/16/1996 15. Height: 5'10" 16. Weight: 260  
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



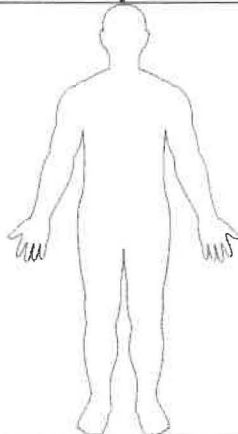
22. Anterior View



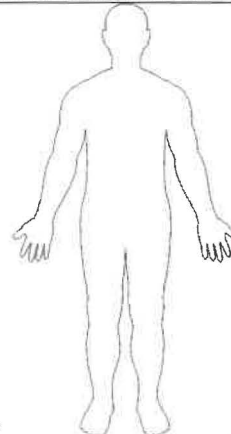
Posterior View

OFFICER

23. Officer: Chase Purcell 24. Race: W 25. Sex: M 26. Age: 24 27. Height: 6'00 28. Weight: 235  
29. Duty Status: ☒ On-duty ☐ Off-duty ☐ Extra duty employment ☒ Uniformed ☐ Plain clothes 30. Yrs Exp: 1.5  
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)



35. Anterior View



Posterior View

# Response to Resistance Report (continued)

Key West Police Department

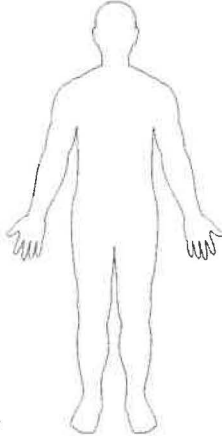
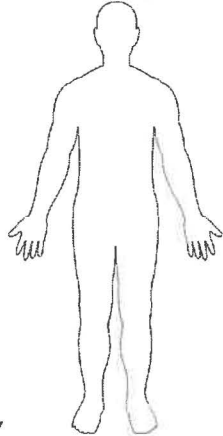
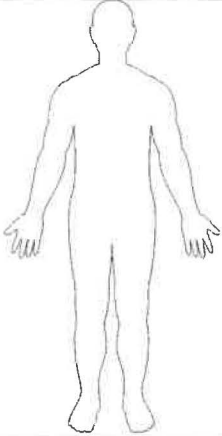
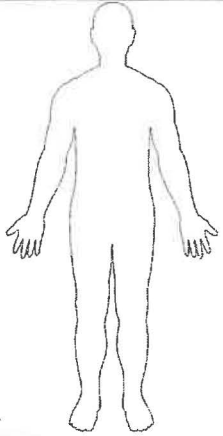
Case No: 20-1371

TASER USE ONLY	36. TASER® device serial #		37. 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"/> 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.			
SUPERVISOR'S INQUIRY	40. Notified Date: 03.02.2020		41. Time: 2335 PM	
	42. Did you respond to the scene: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)			
	43. Did you meet with the Officer: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)			
	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
INT. AFF.	45. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		46. Preparing Supervisor's Signature / ID	
	FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS		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	
	51. If section 48 is "No" record the Professional Standards Control Number:		52. Date Entered:	

# Response to Resistance Report (continued)

Key West Police Department

Case No: 20-1371

OFFICER	23. Officer: Tim Malak		24. Race: W	25. Sex: M	26. Age: 30	27. Height: 6'00"	28. Weight: 240
	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		30. Yrs Exp: 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)						
							
	35. Anterior View			Posterior View			
OFFICER	23. Officer:		24. Race:	25. Sex:	26. Age:	27. Height	28. Weight
	29. 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		30. Yrs Exp:		
	31. 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 35)						
	32. Photographed: <input type="checkbox"/> No <input type="checkbox"/> Yes		33. Treated: <input 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)						
							
	35. Anterior View			Posterior View			

## INCIDENT DATA

Location of Incident <i>211 Duval St, Key West FL 33040-</i>		Premise Type <i>Bar / Nightclub / Lounge</i>	Beat/GP B1, GPB1	03/02/2020 23:25 <i>Mon</i>		
		At Found		03/02/2020 23:25 <i>Mon</i>		
#1	Crime Incident(s) <i>Battery Aggravated</i> <i>AGD</i>	(Com)	Weapon / Tools <i>OTHER WEAPON</i>			Activity
			Entry	Exit	Security	
#2	Crime Incident <i>Resist Arrest / Escape</i> <i>XOM</i>	(Com)	Weapon / Tools			Activity
			Entry	Exit	Security	
#3	Crime Incident	( )	Weapon / Tools			Activity
			Entry	Exit	Security	

MO

V  
I  
C  
T  
I  
M

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

## OTHERS INVOLVED

CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)										
Type: INDIVIDUAL					Injury: None					
Code V2	Name (Last, First, Middle) GARCIA, JOSE ANGEL			Victim of Crime # 1	DOB Age 36 08/01/1983	Race W	Sex M	Relationship To Offender ST	Resident Status Resident	Military Branch/Status
Home Address 1307 Whitehead St - 4 Key West, FL 33040								Home Phone 321-544-7243		
Employer Name/Address Irish Kevins, 211 Duval St (MANAGER)						Business Phone 305-292-1262		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		

# PROPERTY

[illegible]

# INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 20-001371

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

Assisting Officers

*SIMS, F.C. (2301), KOURI, D.G. (3022), MALAK, T.J. (4045)*

Suspect Hate / Bias Motivated:

NARRATIVE

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

OCA

20-001371

Victim

*Society*

Offense

*BATTERY AGGRAVATED*

Date / Time Reported

*Mon 03/02/2020 23:25*

On 3/3/2020 at approximately 2325 hours, Officer Malak and I, Officer Purcell, were flagged down at 211 Duval St in reference to a possible battery.

Jose Garcia the manager at Irish Kevin's Bar told us a white male just threw a glass at him. Garcia pointed out a white male (later identified as Patrick Broder) walking south on Duval St and identified him as the individual who threw the glass. Officer Malak and I caught up with Broder at the intersection of Caroline St and Duval St. We informed Broder why we were speaking with him and escorted him back to Irish Kevin's Bar.

Garcia stated he was not injured and did not wish to press charges. Garcia did however wish to have Broder trespassed from Irish Kevin's Bar. Officer Malak and I escorted Broder onto Charles St to speak with him in a quiet setting. I asked Broder for his driver's license and he refused to give it to me. I instructed Broder to stand next to the patrol vehicle while we attempted to identify him. Broder refused and began to pull away. I grabbed Broder and pulled him back toward the vehicle. Broder then dove into the side of the vehicle screaming as if I had thrown him. Officer Malak Asked Broder why he dove into the side of the car. Broder stated he was thrown into the car and asked what he did. Broder began waving his arms in the air and yelling. Officer Malak instructed Broder to put his arms down and took control of his left wrist. I grabbed Broder's right wrist and we pulled them down to his sides. Broder attempted to pull away from us again. Officer Malak and I performed a two-person straight arm takedown on Broder. After Broder was on the ground he pulled his right arm under his body and refused allow me to pull it out from under him. Broder was given multiple clear verbal commands to stop resisting. Broder refused to allow his arm to be taken out from under him and continually screamed for help. I pulled Broder's arm out from under him and pulled it behind his back. Sgt Sims displayed his taser and placed it against Broder's back. Sgt Sims gave Broder clear verbal commands to stop resisting or he would be tased. I placed Broder in handcuffs.

Officer Malak and I attempted to stand Broder up, but he refused to stand or hold up his own weight. Broder finally stood, and we placed him against the patrol car and searched him. Broder continued to scream that he hadn't done anything.

Based on the facts and evidence, I believe there is probable cause, that on 3/3/2020, Patrick Broder did knowingly and intentionally resist law enforcement officers in the performance of their legal duties, in violation of FSS 843.02.

I placed Broder in my patrol vehicle and transported him to the Monroe County Detention Center without incident.

My Axon BWC was knocked to the ground and did not capture the majority of this incident.



# Incident Report Suspect List

Key West Police Department

OCA: 20-001371

1	Name (Last, First, Middle) <i>BRODER, PATRICK JOHN</i>						Also Known As			Home Address <i>8443 DEL LAGO CIR UNIT 202 TAMPA, FL 33614</i>																																						
	Business Address <i>UNK, UNK, UNK</i>																																															
	DOB <i>08/16/1996</i>	Age <i>23</i>	Race <i>W</i>	Sex <i>M</i>	Eth <i>N</i>	Hgt <i>509</i>	Wgt <i>220</i>	Hair <i>BRO</i>	Eye <i>BRO</i>	Skin <i>LGT</i>	Driver's License / State. <i>B636670962960 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 colspan="2">Weapon, Type</td> <td colspan="2">Feature</td> <td colspan="2">Make</td> <td colspan="2">Model</td> <td>Color</td> <td>Caliber</td> <td colspan="2">Dir of Travel Mode of Travel</td> </tr> <tr> <td colspan="3">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="2">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																																										

# Incident Report Related Property List

Key West Police Department

OCA: 20-001371

1	Property Description <b>AXON BWC 3967</b>			Make		Model		Caliber	
	Color	Serial No.	Value <b>\$0.00</b>		Qty <b>1.000</b>	Unit	Jurisdiction <b>Locally</b>		
	Status <b>Evidence</b>	Date <b>03/02/2020</b>	NIC #	State #	Local #	OAN			
	Name (Last, First, Middle) <b>* No name *</b>			DOB	Age	Race	Sex		

Notes