

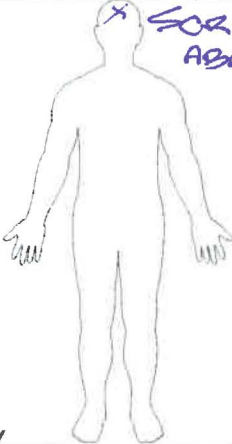
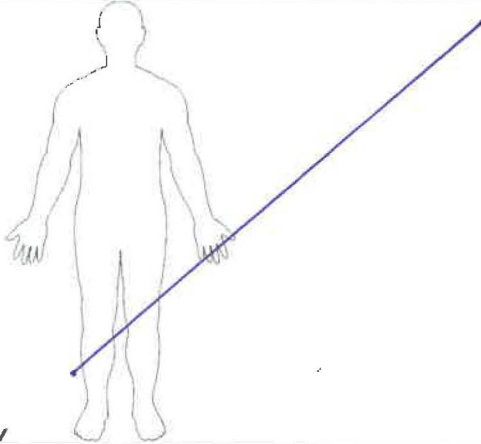
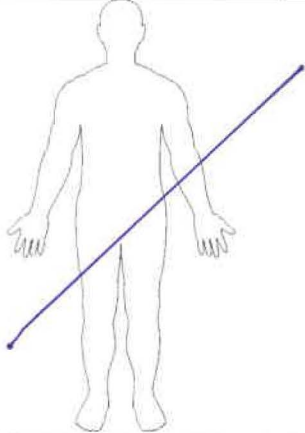
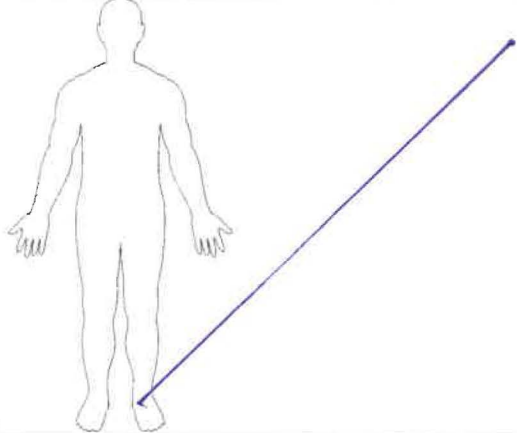
Response to Resistance Report

Key West Police Department

Case No: 20-2179

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: 05/09/20	3. Time: 1215	4. Location: 719 Waddell	5. Incident type: Assist. MCSO
	6. Resistance Level	7. Explanation	8. Response Option	9. Explanation
	<input checked="" type="checkbox"/> Passive:	Non-compliance	<input checked="" type="checkbox"/> Physical Control	Take down
	<input type="checkbox"/> Active:	Tensing, jerking spitting	<input type="checkbox"/> Non-lethal Weapon	
SUBJECT	<input type="checkbox"/> Aggressive:		<input type="checkbox"/> Deadly Force	
	<input type="checkbox"/> Deadly Force:			
	10. Last Name: Milligan	11. First: Brendan	12. Race: W	13. Sex: M
	14. DOB: 10/05/81	15. Height: 5'10"	16. Weight: 175	
	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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes By: <input checked="" type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital <input type="checkbox"/> Detention			
	22. Anterior View		Posterior View	
				
OFFICER	23. Officer: Beeman, T			
	24. Race :W 25. Sex :F 26. Age:35 27. Height:5'2" 28. Weight:135			
	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: 10			
	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 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		
				

Response to Resistance Report (continued)

Key West Police Department

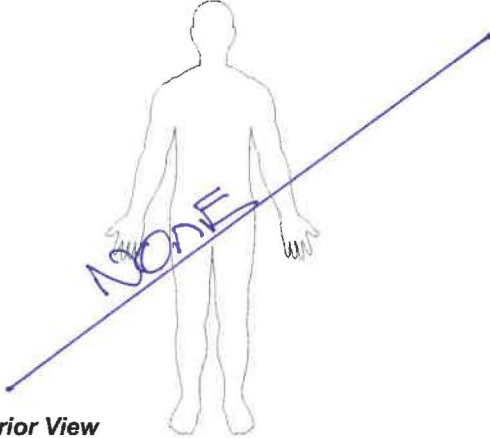
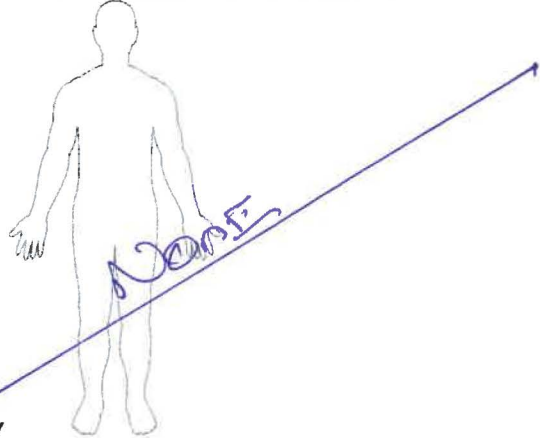
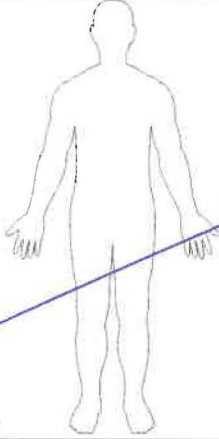
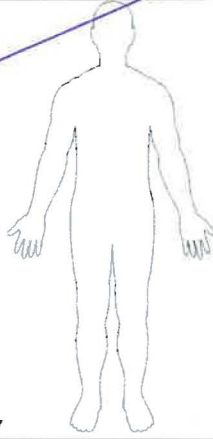
Case No: 20-2179

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: 5/9/20		
41. Time: 1215		
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)		
SEE MCSO CN 20-2829		
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		
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		
50. Date		
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: 20-2179

OFFICER	23. Officer: Arguello, V				24. Race: H	25. Sex: M	26. Age: 33	27. Height: 5'8"	28. Weight: 200
	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: 2	
	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				

I N C I D E N T D A T A	Agency Name Key West Police Department		INCIDENT/INVESTIGATION REPORT				Case# 20-002179					
	ORI FL0440100						Date / Time Reported 05/09/2020 12:09 Sat					
	Location of Incident 719 WADDELL AVE, Key West FL 33040-		Premise Type Home Of Of - Single		Beat/GP B4, GPB4		Last Known Secure 05/09/2020 12:09 Sat					
	#1 Crime Incident(s) (Com) Assist Other Agency ASA		Weapon / Tools NOT APPLICABLE/NONE				Activity					
			Entry		Exit		Security					
V I C T I M	#2 Crime Incident ()		Weapon / Tools				Activity					
	#3 Crime Incident ()		Weapon / Tools				Activity					
			Entry		Exit		Security					
	#3 Crime Incident ()		Weapon / Tools				Activity					
			Entry		Exit		Security					
MO												
O T H E R I N V O L V E D	# of Victims 0		Type:		Injury:		Domestic: N					
	Victim/Business 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					
	VYR	Make	Model	Style	Color	Lic/Lis	VIN					
P R O P E R T Y	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)											
	Type: INDIVIDUAL		Injury: Internal Injuries Possible									
	Code IO	Name (Last, First, Middle) MILLIGAN, BRENDAN COLIN		Victim of Crime #		DOB Age 10/05/1981 38		Race W	Sex M	Relationship To Offender	Resident Status Resident	Military Branch/Status
	Home Address 719 WADDELL AVE KEY WEST, FL 33040		Home Phone 305-363-9953									
	Employer Name/Address (UNEMPLOYED)		Business Phone				Mobile Phone 305-363-9953					
P R O P E R T Y	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					
	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found ("OJ" = Recovered for Other Jurisdiction)											
P R O P E R T Y	VI #	Code	Status Frm/To	Value	OJ	QTY	Property Description		Make/Model		Serial Number	
		35	EVID	\$0.00		1	BWC TO AXON-3385					
		35	EVID	\$0.00		1	BWC/3917					
Officer/ID# BEEMAN, TIFFANY J (3385)												
Invest ID# (0)						Supervisor BLASBERG, FRANK (1598)						
Status	Complainant Signature				Case Status Information Only		05/09/2020		Case Disposition:		Page 1	

INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 20-002179

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

BLASBERG, F. (1598), ARGUELLO, V.S. (3917), CUNEO, E.J. (3922), ANE, A.A. (3418)

Suspect Hate / Bias Motivated:

NARRATIVE

REPORTING OFFICER NARRATIVE

Key West Police Department

Victim	Offense <i>ASSIST OTHER AGENCY</i>	OCA 20-002179 Date / Time Reported Sat 05/09/2020 12:09
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On 05/09/2020, at 1216 hours, Ofc. V. Arguello and I (Ofc. T. Beeman) responded to 719 Waddell Avenue in reference to assisting Monroe County Sheriff's Office Deputy T. Guieb with a possible battery investigation (MCSO Case# 20-2829) that had just occurred in Big Coppitt Key.

Dep. T. Guieb provided the suspect vehicle description of a white Dodge pickup truck and a suspect name of Brendan Colin Milligan (DOB 10/05/1981, Arrestee).

Upon arrival, we located the vehicle parked on the Alberta Street side of 719 Waddell Avenue (located on the corner of Waddell Avenue and Alberta Street). The Alberta Street side door to the residence was wide open, and Ofc. V. Arguello made contact with a white male identifying himself as Milligan.

Sgt. F. Blasberg arrived on scene, but remained by his patrol vehicle.

Milligan exited the residence and stood on the patio speaking with us. Milligan was bleeding from abrasions on his right elbow, tops of his wrists, and knees. Milligan was also missing/wearing only one shoe. Milligan appeared to be under the influence of an intoxicant/unknown substance, as his eyes were heavy lidded, droopy, and glassy. Milligan's speech was also slow and slightly slurred. Milligan was not wearing a face mask (COVID-19), however due to wearing a face mask myself I was unable to verify whether or not the odor of alcohol was present.

We explained that Dep. T. Guieb was on his way to speak to him in reference to an incident in Big Coppitt Key. Milligan immediately began telling us about his account of the incident. Milligan stated that he had gone to visit his girlfriend at 49 Riviera Drive in Big Coppitt Key. Milligan stated that she was not home and as he left, he made a three-point-turn in the street. Milligan stated as he was backing up, he saw a female neighbor walking behind his truck. He stated that he saw her in his mirror and that she was not close enough to get struck by his vehicle. Milligan stated that the female's husband then came out and began yelling at him. Milligan stated that the husband was yelling that he had hit his mailbox. Milligan stated that he did not strike their mailbox and got out of his vehicle to check. Milligan stated that when he got out of his vehicle, the husband approached him with what he repeated described as a metal or aluminum pipe. Milligan stated as the husband approached him with the pipe, he grabbed a hold of the pipe, pulled him into a "headlock" and took him down to the ground. Milligan stated that no blows were exchanged while on the ground, and that it was "broken up quickly". Milligan stated that he then got back into his vehicle and returned home.

Milligan pointed to the abrasions on his body, which were consistent with having been on the ground. He also showed me his hands, which had no marks, redness, or swelling on the knuckles.

We again explained that we did not have any information regarding the case, and that Dep. T. Guieb would be here shortly.

Dep. T. Guieb arrived on scene and asked Milligan to step out of the yard/patio area to speak with him. Milligan complied and we stood out on the front lawn while Dep. T. Guieb conducted his interview. Dep. T. Guieb advised Milligan of his Miranda Rights and in response Milligan sat down on the ground. He continued to speak to Dep. T. Guieb from this position. Once Milligan completed his statement, Dep. T. Guieb instructed him to place his hands behind his back. Dep. T. Guieb placed a handcuff on Milligan's left wrist, however he refused to place his right hand behind his back. I took hold of Milligan's right arm and instructed him to place his hand behind his back. Milligan did not comply on his own, but did not resist when I placed it behind his back for him.

REPORTING OFFICER NARRATIVE*Key West Police Department*

Victim	Offense <i>ASSIST OTHER AGENCY</i>	OCA <i>20-002179</i>
		Date / Time Reported <i>Sat 05/09/2020 12:09</i>

Once handcuffed, Milligan became agitated and began cursing at us and yelling "fuck you". We stood Milligan up and he immediately attempted to pull away from us. I again grabbed hold of Milligan's right wrist and instructed him to not resist. We began walking Milligan towards Dep. T. Guieb's patrol vehicle, when he made a sudden lurch forward as if he was attempting to run. We were able to maintain physical control over Milligan and continued to the patrol vehicle. Once at the patrol vehicle, Milligan again began pulling away from us, kicking at us, and slamming his body and head into the side of the patrol vehicle. We pulled Milligan back away from the patrol vehicle and redirected him towards the ground, where we fell with Milligan's upper body in the grass and lower body on the sidewalk. Once on the ground, Milligan continued to try to kick us, and I placed him in a "Figure Four" leg lock to control his legs and hips, keeping his body on the ground. I instructed Milligan to stop resisting, take a deep breath, and told him that we were not trying to hurt him.

Milligan continued to shout obscenities at us and began spitting us. I could see that there was now a small laceration to the front of Milligan's head, which was bleeding into his mouth as he was spitting at us. I instructed Milligan to stop spitting. Milligan shouted that he had the Coronavirus and that now we were going to get it too. Milligan also began biting the ground, taking a mouthful of dirt and grass and spitting it out. He turned his face towards Dep. T. Guieb and again made a biting motion as if he was attempting to bite Dep. T. Guieb's knee, which was several inches away.

Ofc. V. Arguello retrieved a spit hood from his patrol vehicle and placed it on Milligan's head to prevent him from spitting on us.

Ofc. A. Ane and Ofc. E. Cuneo arrived on scene.

Sgt. F. Blasberg retrieved a "Hobble" leg restraint device from his vehicle and placed it on Milligan (around the ankles).

Rescue arrived on scene to assess Milligan. They determined that the laceration to his forehead was superficial and required no medical treatment.

Milligan was placed in the rear seat of Dep. T. Guieb's patrol vehicle (still hobbled and in a spit hood) and transported to the Monroe County Detention Center.

I uploaded my BWC to AXON.

There is nothing further.

****MCSO COMPLETED ARREST/CHARGES****

Incident Report Related Property List

Key West Police Department

OCA: 20-002179

1 Property Description BWC TO AXON-3385		Make		Model		Caliber	
Color	Serial No.	Value \$0.00	Qty 1.000	Unit	Jurisdiction Locally		
Status Evidence	Date 05/09/2020	NIC #	State #	Local #	OAN		
Name (Last, First, Middle) * No name *			DOB	Age	Race	Sex	

Notes

2 Property Description BWC/3917		Make		Model		Caliber	
Color	Serial No.	Value \$0.00	Qty 1.000	Unit	Jurisdiction Locally		
Status Evidence	Date 05/09/2020	NIC #	State #	Local #	OAN		
Name (Last, First, Middle) * No name *			DOB	Age	Race	Sex	

Notes

CASE SUPPLEMENTAL REPORT

Printed: 05/26/2020 10:17

Key West Police Department

OCA: **20002179**

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

Case Status: *INFORMATION ONLY*Case Mng Status: *NA*Occurred: *05/09/2020*Offense: *ASSIST OTHER AGENCY*

Investigator: *ARGUELLO, VICTOR S (3917)*Date / Time: *05/09/2020 13:58:47, Saturday*Supervisor: *BLASBERG, FRANK (1598)*Supervisor Review Date / Time: *05/10/2020 09:27:22, Sunday*

Contact:

Reference: *General Supplemental Report*

On Saturday, May 9, 2020 at approximately 1209 hours, Ofc. Beeman and I (Ofc. Arguello) responded to 719 Waddell Street, reference assisting Monroe County Deputy Guieb in locating a white Dodge Truck (bearing Florida tag NPQY62).

Upon arrival in the area, I located the vehicle in the said location. The truck was parked on the Alberta Street side of the property (corner house) and was dented all around. Ofc. Beeman and I made contact with the registered owner (later identified as Brendan Milligan, DOB 10/5/81). Milligan had bloodshot eyes, had slurred speech and was profusely sweating. I told Milligan that we did not have anything to do with the incident that had just occurred and that he did not have to tell us anything. I told Milligan that a Deputy was on his way to get his side of the story. Milligan had a laceration on his right elbow and knee, and several small lacerations around his hand/knuckle area, he refused to be seen by rescue.

Deputy Guieb arrived on scene. Deputy Guieb interviewed Milligan and decided to arrest Milligan. Deputy Guieb was able to handcuff Milligan. I assisted in standing Milligan off the ground. Milligan began to tense up and yell at Deputy Guieb, I told Milligan not to resist because it was going to get worst for him. Milligan pulled away from us and started yelling. I assisted in escorting Milligan towards Deputy Guieb's patrol vehicle. Milligan banged his forehead twice against the rear metal column of Deputy Guieb's patrol vehicle. I assisted in taking Milligan down to the ground for his safety. Milligan began spitting once he was on the ground and yelling that he had the corona virus. I placed a spit mask on Milligan and assisted in placing a hobble around his legs, since he was trying to kick us.

I assisted in placing Milligan inside Deputy Guieb's patrol vehicle. I do not have any further involvement in this case. This incident was recorded on my BWC.

Investigator Signature

Supervisor Signature