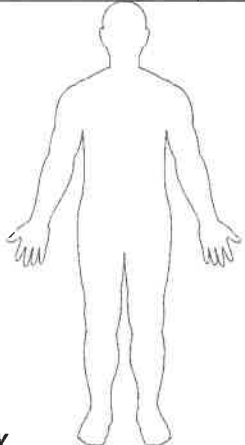
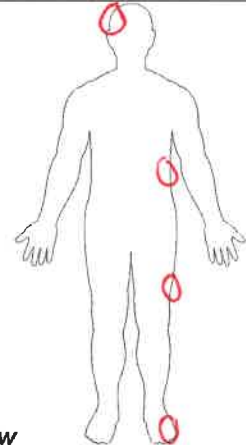
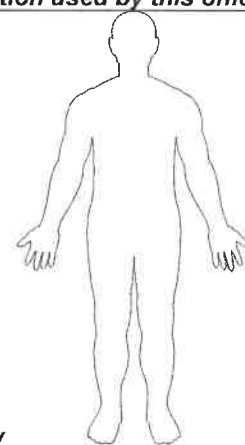
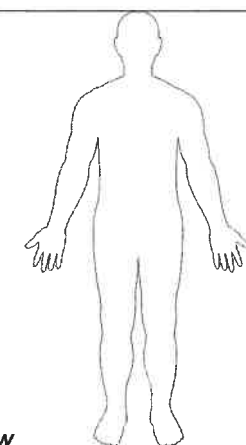


Response to Resistance Report

Key West Police Department

Case No: 21-2842

1. A Response to Resistance Report will be completed by the supervisor for: (Check all that apply)									
<input checked="" type="checkbox"/> A response through the use of non-lethal weapons, <input 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 checked="" 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)									
INCIDENT	2. Date: 05/30/2021 3. Time: 0032 hrs 4. Location: 5900 College Road 5. Incident type: S36B								
	<table style="width:100%; border: none;"> <tr> <td style="width: 33%; border: none;">6. Resistance Level</td> <td style="width: 33%; border: none;">7. Explanation</td> <td style="width: 33%; border: none;">8. Response Option</td> <td style="width: 33%; border: none;">9. Explanation</td> </tr> <tr> <td style="border: none;"> <input checked="" type="checkbox"/> Passive: <input checked="" type="checkbox"/> Active: <input checked="" type="checkbox"/> Aggressive: <input type="checkbox"/> Deadly Force: </td> <td style="border: none;"> VERBALLY COMBATIVE PULLING AWAY & LIMP BODY KICKING AND PUSHING </td> <td style="border: none;"> <input type="checkbox"/> Physical Control <input checked="" type="checkbox"/> Non-lethal Weapon <input type="checkbox"/> Deadly Force </td> <td style="border: none;"> _____ TASER _____ </td> </tr> </table>	6. Resistance Level	7. Explanation	8. Response Option	9. Explanation	<input checked="" type="checkbox"/> Passive: <input checked="" type="checkbox"/> Active: <input checked="" type="checkbox"/> Aggressive: <input type="checkbox"/> Deadly Force:	VERBALLY COMBATIVE PULLING AWAY & LIMP BODY KICKING AND PUSHING	<input type="checkbox"/> Physical Control <input checked="" type="checkbox"/> Non-lethal Weapon <input type="checkbox"/> Deadly Force	_____ TASER _____
	6. Resistance Level	7. Explanation	8. Response Option	9. Explanation					
	<input checked="" type="checkbox"/> Passive: <input checked="" type="checkbox"/> Active: <input checked="" type="checkbox"/> Aggressive: <input type="checkbox"/> Deadly Force:	VERBALLY COMBATIVE PULLING AWAY & LIMP BODY KICKING AND PUSHING	<input type="checkbox"/> Physical Control <input checked="" type="checkbox"/> Non-lethal Weapon <input type="checkbox"/> Deadly Force	_____ TASER _____					
10. Last Name: Manns 11. First: Alliyah 12. Race: B 13. Sex: F 14. DOB: 07/10/1995 15. Height: 5'05" 16. Weight: 150									
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 checked="" type="checkbox"/> Under the influence of controlled substance <input checked="" type="checkbox"/> Emotionally / mentally disturbed 19. Injuries: <input type="checkbox"/> No <input type="checkbox"/> Evident <input checked="" 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 type="checkbox"/> EMT/Paramedic on scene <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Detention									
SUBJECT									
									
OFFICER	22. Anterior View Posterior View								
	23. Officer: LEO HERNANDEZ 24. Race: W 25. Sex: M 26. Age: 46 27. Height: 5'04" 28. Weight: 150								
	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 type="checkbox"/> No <input checked="" 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: Taser (Drive stun)								
									
									
35. Anterior View Posterior View									

Response to Resistance Report (continued)

Key West Police Department

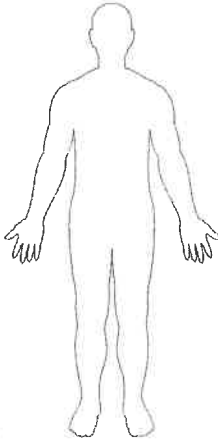
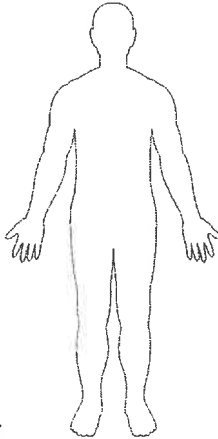
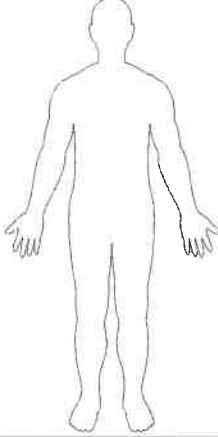
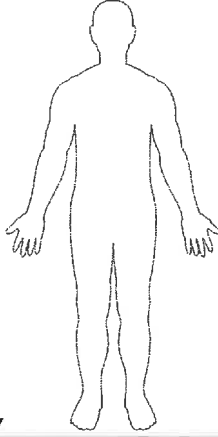
Case No: 21-2842

TASER USE ONLY	36. TASER® device serial # X1200CRPK	37. TASER® device serial #	
	TASER®Cam serial # V21002AK9	TASER®Cam serial #	
	Cartridge 1 serial #	Cartridge 1 serial #	
	Cartridge 2 serial #	Cartridge 2 serial #	
	Number of cycles: 4	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 checked="" 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 checked="" 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: 05/30/2021		
	41. Time: 0150 hrs		
	42. Did you respond to the scene: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)		
	43. Did you watch all relevant videos associated with the use of force? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)		
	44. Did you meet with the Officer(s): <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)		
	45. During your review did you find any potential policy violations or training issues associated with the incident?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)		
	46. 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
	Paul Gray	5900 College Road	412-780-1680
47. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS			
48. Preparing Supervisor's Signature / ID		49. Date <u>5-30-21</u>	
50. 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)			
51. Signature of Internal Affairs Inspector 3317		52. Date <u>6/30/2021</u>	
53. If section 48 is "No" record the Professional Standards Control Number:		54. Date Entered:	

Response to Resistance Report (continued)

Key West Police Department

Case No: 21-2842

OFFICER	23. Officer: Randolph Ham 24. Race: W 25. Sex: M 26. Age: 29 27. Height: 6'00" 28. Weight: 205	
	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: 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:	
 <p>35. Anterior View</p>	 <p>Posterior View</p>	
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 checked="" 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)	
 <p>35. Anterior View</p>	 <p>Posterior View</p>	

INCIDENT/INVESTIGATION REPORT

I N C I D E N T D A T A	Agency Name <i>Key West Police Department</i>			Case# <i>21-002842</i>			
	ORI <i>FL0440100</i>			Date / Time Reported <i>05/29/21 20:27 Sat</i>			
	Location of Incident <i>224 DUVAL ST, Key West FL 33040</i>			Gang Relat <i>NO</i>	Premise Type <i>Bar / Nightclub /</i>	Beat/GP <i>B1, GPB1</i>	Last Known Secure <i>05/29/21 20:27 Sat</i>
				At Found <i>05/29/21 20:27 Sat</i>			

#1	Crime Incident(s) <i>Battery SCA</i>	(Com)	Weapon / Tools <i>HANDS, FIST, FEET</i>			Activity
			Entry	Exit	Security	
						Activity
#2	Crime Incident <i>Disorderly Conduct DCA</i>	(Com)	Weapon / Tools			Activity
			Entry	Exit	Security	
						Activity
#3	Crime Incident <i>Resist Arrest / Escape XOM</i>	(Com)	Weapon / Tools			Activity
			Entry	Exit	Security	
						Activity

MO	# of Victims <i>6</i>		Type: <i>LAW ENFORCEMENT (LEO)</i>		Injury: <i>Minor Injuries</i>		Domestic: <i>N</i>				
V I C T I M	V1	Victim/Business Name (Last, First, Middle) <i>HAM, RANDOLPH SCOTT J</i>			Victim of Crime # <i>1,3</i>	DOB <i>07/26/91</i>	Race <i>W</i>	Sex <i>M</i>	Relationship To Offender <i>ST</i>	Resident Status <i>Resident</i>	Military Branch/Status
	Home Address <i>1604 N ROOSEVELT BLVD, Key West, FL 33040-</i>								Home Phone <i>305-809-1111</i>		
	Employer Name/Address <i>KEY WEST POLICE DEPARTMENT (OFFICER)</i>						Business Phone		Mobile Phone		
	VYR	Make	Model	Style	Color	Lic/Lis	VIN				

O T H E R S	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)										
I N V O L V E D	Type: <i>INDIVIDUAL</i>		Injury: <i>Minor Injuries</i>								
	V2	Name (Last, First, Middle) <i>WEST, JOHN DAVID</i>			Victim of Crime # <i>1,</i>	DOB <i>08/22/75</i>	Race <i>W</i>	Sex <i>M</i>	Relationship To Offender <i>ST</i>	Resident Status <i>Resident</i>	Military Branch/Status
	Home Address <i>5537 COLLEGE RD KEY WEST, FL 33040</i>								Home Phone		
	Employer Name/Address <i>BULL (BARBACK)</i>						Business Phone		Mobile Phone		
	Type: <i>LAW ENFORCEMENT (LEO)</i>		Injury: <i>Minor Injuries</i>								
V3	Name (Last, First, Middle) <i>HERNANDEZ, LEONARDO</i>			Victim of Crime # <i>1,3</i>	DOB <i>01/09/75</i>	Race <i>W</i>	Sex <i>M</i>	Relationship To Offender <i>ST</i>	Resident Status	Military Branch/Status	
Home Address <i>1604 N ROOSEVELT BLVD KEY WEST, FL 33040</i>								Home Phone <i>305-</i>			
Employer Name/Address <i>Key West Police Department, 1604 N ROOSEVELT BLVD (POLICE OFFICER)</i>						Business Phone <i>305-809-1111</i>		Mobile Phone <i>305-</i>			

P R O P E R T Y	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found ("OJ" = Recovered for Other Jurisdiction)										
V1 #	Code	Status Fm/To	Value	OJ	QTY	Property Description	Make/Model	Serial Number			
	<i>35</i>	<i>EVID</i>	<i>\$0.00</i>		<i>1</i>	<i>BWC 3452</i>					
	<i>34</i>	<i>EVID</i>	<i>\$0.00</i>		<i>1</i>	<i>IN CAR COBAN</i>					

Officer/ID#	<i>HERNANDEZ, LEONARDO (3452)</i>		Supervisor	<i>KOURI, DAVID G (3022)</i>	
Invest ID#	<i>(0)</i>		Case Status	<i>Cleared By Arrest 05/30/21</i>	
Status	Complainant Signature	Case Disposition:	<i>Cleared By Arrest 05/30/21</i>		

Incident Report Additional Name List

Key West Police Department

OCA: 21-002842

Additional Name List

Name Code/#	Name (Last, First, Middle)	Victim of Crime #	DOB	Age	Race	Sex
1) VI 4	WELLINGER, SONIA KUHN	1,	01/22/62	59	W	F
	Address 17607 STERLING TER, REDINGTON SHORES, FL 33708-			H: 727-698-9247		
	Empl/Addr Unknown			B: - -		
				Mobile #: - -		
2) VI 5	Society	2,3				
	Address			H: - -		
	Empl/Addr			B: - -		
				Mobile #: - -		

INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 21-002842

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

	UCR	Status	Quantity	Type Measure	Suspected Type	Up to 3 types of activity
D R U G S						

Assisting Officers
WAITE, K.J. (3646), HOWELL, W.N. (4059), BOZZETTI, C.A. (4058), HAM, R. (4009)

Suspect Hate / Bias Motivated:

NARRATIVE

REPORTING OFFICER NARRATIVE

Key West Police Department

OCA

21-002842

Victim

HAM, RANDOLPH SCOTT J

Offense

BATTERY

Date / Time Reported

Sat 05/29/21 20:27

On May 29, 2021, at about 2058 hours, Ofc. N. Howell, Ofc. A. Bozzetti, Ofc. K. Waite and I, Ofc. (L. Hernandez), responded to 224 Down1 Duval Street (Whistle Bar), in reference to a disturbance and battery incident.

Upon my arrival, Ofc. Waite and Ofc. Howell were interviewing victims and witnesses to the incident. Ofc. Bozzetti and I met with Alliyah Mary Manns (DOB 07/10/1995) (Arrestee) and Katrele Jena`Altemese Bain (DOB 06/22/1990) (Arrestee), both identified by their Florida driver licenses.

I stayed with Manns and Bain while Ofc. Bozzetti went to speak with the victims and witnesses. Manns and Bain immediately started to yell and argued saying "we reacted because they threw food at us, yes we did throw drinks at them, we were just asking for directions, look at the cameras, look at the cameras". When I asked where the alleged assault took place, Manns and Bain said outside and that they never went inside the establishment.

Further investigation revealed that Manns and Bain were inside the establishment. Cellphone video was provided by one of the witnesses depicting Bain inside the establishment, screaming, raising her hands while aggressively charging towards security staff and the bouncer. The video showed Manns trying to control and restrain Bain to no avail. Video showed Bain striking John David West (DOB 08/22/1975) who is a barback. West also said that Bain spat towards and at him with spit landing on his person.

The video showed Bain screaming from the top of her lungs and being asked multiple times by staff and patrons to leave the premises. At one point the establishment's bouncer carries Bain out of the establishment, while she is screaming, smacking the bouncer on his left arm and trying to force her way back into the establishment. Soon thereafter Bain and Manns returned to the establishment and got into an argument with patrons. Manns is seen trying to grab a female later identified as Sonia Kuhn Wellinger (DOB 01/22/1962). Wellinger tells Manns to get away from her and Manns continued to argue eventually being escorted out by security.

Witnesses and victims to the incident, Grant Steven Wellinger (DOB 01/07/1997) and his mother Sonia Kuhn Wellinger stated that the drinks Manns and Bain threw at them ruined Grant's baseball cap and t-shirt.

After reviewing all the videos and statements provided, it was obviously clear that Manns and Bain were engaged in disorderly conduct by corrupting the public morals and while engaging in such a conduct that affected the peace and quiet of the patrons and staff. Bain also battered West (barback) and the bouncer who chose not to press charges.

While placing Bain under arrest, she argued, tensed up and tried to defeat our attempts to place her in custody by pulling away, twisting and turning away her body from us. Ofc. Howell and I repeatedly told Bain to stop resisting. I placed Bain in handcuffs, checked them for tightness and double locked them. As I was walking Bain to my patrol vehicle she kept screaming and tried turning towards me when I was ordering her to get into the patrol vehicle.

Ofc. Howell conducted a search incident to arrest of Bain's purse. Bain did not have any belongings on herself.

Based in all facts and evidence, I believe I have probable cause that Katrele Jena`Altemese Bain committed the misdemeanor criminal offense of battery as defined in F.S. 784.03. Bain struck, punched and spat at West. Bain threw a drink that hit two victims, Sonia and Grant Wellinger.

Based on all facts and evidence, I believe I have probable cause that Katrele Jena` Altemese Bain committed the misdemeanor criminal offense of disorderly conduct in a licensed establishment as defined in F.S. 509.143. Bain

REPORTING OFFICER NARRATIVE

Key West Police Department

OCA 21-002842
Date / Time Reported Sat 05/29/21 20:27

Victim HAM, RANDOLPH SCOTT J	Offense BATTERY
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engaged in disorderly conduct by corrupting the public morals, breached the peace and outraged the sense of public decency.

Based on all facts and evidence, I believe I have probable cause that Katrele Jena` Altemese Bain committed the misdemeanor criminal offense of resisting an officer without violence to his/her person as defined in F.S. 843.02. Bain tried to defeat our attempts to be placed under a lawful arrest by pulling away and tensing up when we were trying to place her in handcuffs.

Bain was highly intoxicated as per evidence of strong odor of alcoholic beverage emitting from her breath, argumentative behavior and mood swings such as laughing for not apparent reason and then arguing about being arrested.

I transported Bain to the Monroe County Detention Center where she was rejected by the jail nurse due to an alleged toxic reaction. Bain was transported to Lower Keys Medical Center Emergency room for clearance.

Bain was cleared by LKMC and I transported her back to the Monroe County Jail where she was turned over to Detention Deputies without any further incidents.

My BWC and in car coban (3452) were both activated during this incident. Nothing else to report.

Incident Report Suspect List

Key West Police Department

OCA: 21-002842

1	Name (Last, First, Middle) <i>BAIN, KATRELE JENA` ALTEMESE</i>					Also Known As					Home Address <i>13725 NE 6TH AVE NORTH MIAMI, FL 33161 305-345-5828</i>				
	Business Address <i>UNKNOWN, UNKNOWN</i>														
	DOB <i>06/22/90</i>	Age <i>30</i>	Race <i>B</i>	Sex <i>F</i>	Eth <i>N</i>	Hgt <i>500</i>	Wgt	Hair <i>BLK</i>	Eye <i>BLK</i>	Skin <i>BLK</i>	Driver's License / State. <i>B500510907220 FL</i>				
Scars, Marks, Tattoos, or other distinguishing features															

Notes _____ Physical Char _____

2	Name (Last, First, Middle) <i>MANNIS, ALLIYAH MARY</i>					Also Known As					Home Address <i>18901 NW 7TH COURT MIAMI, FL 33169</i>				
	Business Address <i>UNKNOWN, UNKNOWN</i>														
	DOB <i>07/10/95</i>	Age <i>25</i>	Race <i>B</i>	Sex <i>F</i>	Eth <i>N</i>	Hgt <i>505</i>	Wgt	Hair <i>BLK</i>	Eye <i>BLK</i>	Skin <i>BLK</i>	Driver's License / State. <i>M520013957500 FL</i>				
Scars, Marks, Tattoos, or other distinguishing features															

Notes _____ Physical Char _____

Notes _____ Physical Char _____

Incident Report Related Property List

Key West Police Department

OCA: 21-002842

1	Property Description BWC 3452			Make		Model		Caliber	
Color		Serial No.		Value \$0.00		Qty 1.000		Unit EA	Jurisdiction Locally
Status Evidence		Date 05/29/21 00:00:00	NIC #		State #		Local #		OAN
Name (Last, First, Middle) * No name *					DOB		Age	Race	Sex

Notes

2	Property Description IN CAR COBAN			Make		Model		Caliber	
Color		Serial No.		Value \$0.00		Qty 1.000		Unit EA	Jurisdiction Locally
Status Evidence		Date 05/29/21 00:00:00	NIC #		State #		Local #		OAN
Name (Last, First, Middle) * No name *					DOB		Age	Race	Sex

Notes

CASE SUPPLEMENTAL REPORT
NOT SUPERVISOR APPROVED

Printed: 05/30/2021 04:48

OCA: **21002842**

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

Investigator: *HAM, RANDOLPH (4009)*

Date / Time: *05/30/2021 01:45:38, Sunday*

Supervisor: *(0)*

Supervisor Review Date / Time: *NOT REVIEWED*

Contact:

Reference: *General Supplemental Report*

On May 30, 2021 at approximately 0015 hours, I, Ofc. S. Ham was dispatched to 5900 College Rd. (Lower Keys Medical Center), reference an assist with transporting Ofc. L. Hernandez's arrestee.

Upon arrival, Ofc. Hernandez stated Alliyah Manns did not want him to handle her anymore. Ofc. Hernandez stated he wished for me to transport Manns from the ER back to Monroe County Detention Center.

I spoke to Manns who was laying face down on the hospital bed. Manns asked if I was a supervisor and I told her no. Manns asked me if she could speak to a supervisor because she did not want to be near Ofc. Hernandez. Ofc. Hernandez stated our supervisor was busy and was not going to be able to respond. Manns asked if she could have her denial for a supervisor in writing and I advised her it was all being recorded. I told Manns I was going to be transporting her to county and asked her to come peacefully. Manns rolled to her side and placed both her hands out front as if she was going to get up. I asked Manns to bring her legs around to step off the bed and she would not. I grabbed Manns' left leg and she went limp with it. I tried grabbing Manns hands to help pull her off the bed and noticed the handcuffs were not double locked. I double locked both Manns' handcuffs and asked her to sit up. Manns refused to sit up. I asked Manns what her problem was with Ofc. Hernandez and she stated it was "racial discrimination." Manns stated she is requesting a supervisor and "if you have to drag me out of here, that's what we are going to do."

Ofc. Hernandez stepped outside to speak with Sgt. J. Hammers. Ofc. Hernandez stated Sgt. Hammers was tied up at the moment and was not available to come out. Ofc. Hernandez stated we are to use reasonable force necessary to escort Manns to my patrol vehicle.

Ofc. Hernandez and I went back inside to escort Manns out of the ER. One of the nurses at the ER stated they needed the room for another patient and pushed the bed closer to the exit.

I grabbed Manns by her right arm and attempted to lift her out of the bed. Manns dropped all her body weight to the floor and sat down. I transitioned from Manns right arm to her legs while Ofc. Hernandez had her from underneath her shoulders. Manns began kicking and screaming trying to escape my grip. Manns' left leg slipped out of my grip and I was able to regain control before she was able to kick me. I told Manns to stop kicking as Ofc. Hernandez told her multiple times to stop resisting. Ofc. Hernandez and I set Manns down once we got through the exit doors because she was complaining about not being able to breath. Ofc. Hernandez readjusted his grip and grabbed Manns by her wrists and we continued carrying her towards the car. Manns continued pulling and moving around causing Ofc. Hernandez to lose his footing and almost fall over. Ofc. Hernandez regained his footing and we were able to get Manns to my patrol car. Ofc. Hernandez and I set Manns back down as I unlocked the door. Manns rolled over to her stomach and continued screaming. Ofc. Hernandez and I rolled Manns over to her side and I grabbed underneath Manns' arms to sit

Investigator Signature: _____

CASE SUPPLEMENTAL REPORT
NOT SUPERVISOR APPROVED

Printed: 05/30/2021 04:48

OCA: **21002842**

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Investigator: *HAM, RANDOLPH (4009)*

Date / Time: *05/30/2021 01:45:38, Sunday*

Supervisor: *(0)*

Supervisor Review Date / Time: *NOT REVIEWED*

Contact:

Reference: *General Supplemental Report*

her up. We gave Manns multiple verbal commands to get into the car and she refused. Ofc. Hernandez told Manns to get in the car or she will get tased. Manns stated "tase me, tase me." Ofc. Hernandez removed his taser cartridge and drive stunned Manns one time and she started rolling around on the ground. I told Manns to sit up and get into the car and she responded "no." Ofc. Hernandez gave her multiple verbal commands to stand up and get inside the car. Manns stayed seated on the ground. I stepped behind Manns and wrapped my arms around her waist. I picked Manns up and placed her in the backseat of my patrol car. Manns turned herself sideways and kicked both feet out of the car. Ofc. Hernandez stepped in between Manns and I and instructed me to push her feet in while he tried to get her upper body on the seat. Manns kicked both her feet at me striking me in the chest. I told Manns if she does not bring her feet in the car, she will get tased. Ofc. Hernandez told Manns 3 more times to place her legs in the car. Manns refused to put her legs in the car and Ofc. Hernandez drive stunned Manns again. Manns brought both her legs in and sat back into the chair. I placed the seat belt on Manns and shut the door.

I stood by for Sgt. Hammers to respond for a response to resistance.

I transported Manns to Monroe County Detention Center without further incidents.

My Axon BWC and Axon Fleet in-car were activated and uploaded.

Investigator Signature: _____