

Response to Resistance Report

Key West Police Department

Case No: 23-5907

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)

2. Date: 10/28/23 **3. Time:** 0250hrs **4. Location:** 200 block of Duval St **5. Incident type:** Disorderly

INCIDENT	6. Resistance Level	7. Explanation	8. Response Option	9. Explanation
	<input type="checkbox"/> Passive: <input checked="" type="checkbox"/> Active: <input type="checkbox"/> Aggressive: <input type="checkbox"/> Deadly Force:	<u>Pulling Away/Actively Fighting</u>	<input type="checkbox"/> Physical Control <input checked="" type="checkbox"/> Non-lethal Weapon <input type="checkbox"/> Deadly Force	<u>OC Spray</u>

10. Last Name: Brodsky **11. First:** Bennett **12. Race:** W **13. Sex:** M

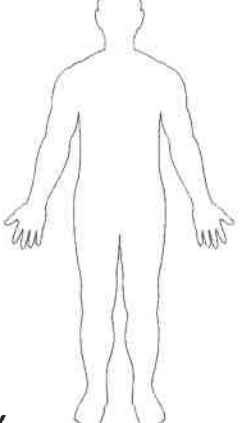
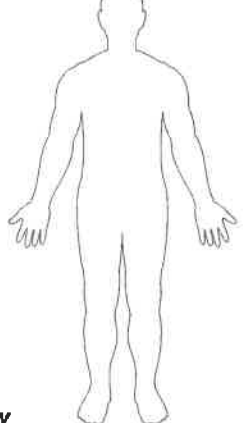
14. DOB: 10/10/2003 **15. Height:** 6ft **16. Weight:** 185

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
		

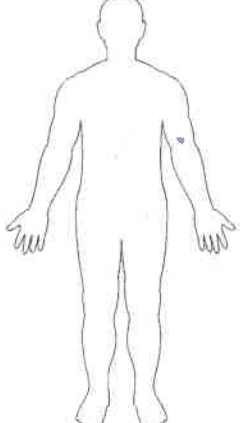
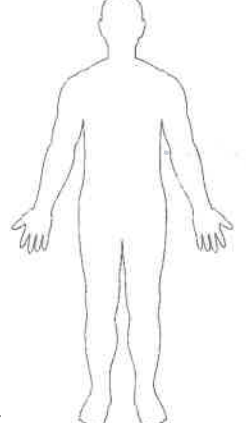
23. Officer: Michael Chaustit **24. Race:** A **25. Sex:** M **26. Age:** 45 **27. Height:** 6ft **28. Weight:** 250

29. Duty Status: On-duty Off-duty Extra duty employment Uniformed Plain clothes **30. Yrs Exp:** 17

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: _____ Error! Reference source not found.

TASER USE ONLY	36. TASER® device serial #		37. TASER® device serial #	
	Battery serial #		Battery serial #	
	Cartridge 1 serial #1	serial #2	Cartridge 1 serial #1	serial #2
	Cartridge 2 serial #3	serial # 4	Cartridge 2 serial # 3	serial #4
	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: 10/28/23		41. Time: 0250hrs	
	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 checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)			
	Name		Address	Phone Number
47. Preparing Supervisor / Printed Name		48. Preparing Supervisor / Signature / ID	49. Date	
John Dear		John 338	11/14/23	
INT. AFF.	50. Did the review of this incident conclude that use of force was in compliance with Departmental policy? <input type="checkbox"/> No <input type="checkbox"/> Yes		51. Signature of Internal Affairs Inspector	
			52. Date	
				11/17/24

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10. Last Name: Minnick **11. First:** Aidan **12. Race:** W **13. Sex:** M
14. DOB: 11/21/2002 **15. Height:** 6ft **16. Weight:** 180
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


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OFFICER	35. Anterior View	Posterior View

Response to Resistance Report (continued)

Key West Police Department

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	Cartridge 2 serial #3	serial # 4	Cartridge 2 serial # 3	serial #4	
	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.					
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	46. 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
47. Preparing Supervisor / Printed Name		48. Preparing Supervisor / Signature / ID		49. Date	
Jelley Dean		 3386		11/14/23	
INT. AFF.	50. Did the review of this incident conclude that use of force was in compliance with Departmental policy? <input type="checkbox"/> No <input type="checkbox"/> Yes		51. Signature of Internal Affairs Inspector		
				52. Date	

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>23-005907</i>						
	ORI <i>FL0440100</i>								Date / Time Reported <i>10/28/2023 02:50 Sat</i>						
	Location of Incident <i>215 DUVAL ST, Key West FL 33040</i>				Gang Relat <i>NO</i>	Premise Type <i>Convenience Store</i>	Beat/GP <i>B1, GPB1</i>		Last Known Secure <i>10/28/2023 02:49 Sat</i>						
	#1	Crime Incident(s) <i>Disorderly Conduct DCA</i>			(Com)			Weapon / Tools		Activity					
		Entry		Exit		Security									
		Crime Incident			()			Weapon / Tools		Activity					
	#2	Entry		Exit		Security									
		Crime Incident			()			Weapon / Tools		Activity					
	#3	Entry		Exit		Security									
		Crime Incident			()			Weapon / Tools		Activity					
MO															
V I C T I M	# of Victims <i>1</i>		Type: SOCIETY/PUBLIC/STATE				Injury:				Domestic: N				
	Victim/Business Name (Last, First, Middle) <i>Society</i>			Victim of Crime #		DOB Age		Race	Sex	Relationship To Offender		Resident Status <i>N/A</i>	Military Branch/Status		
	Home Address						Email				Home Phone				
	Employer Name/Address						Business Phone				Mobile Phone				
	VYR	Make	Model	Style	Color	Lic/Lis		VIN							
	CODES: V- Victim (Denote V2, V3) WI = Witness IO = Involved Other RP = Reporting Person (if other than victim)														
O T H E R I N V O L V E D	Type:		Injury:												
	Code	Name (Last, First, Middle)			Victim of Crime #		DOB Age		Race	Sex	Relationship To Offender		Resident Status	Military Branch/Status	
	Home Address						Email				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						Email				Home Phone					
Employer Name/Address						Business Phone				Mobile Phone					
P R O P E R T Y	1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged / Vandalized 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown ("OJ" = Recovered for Other Jurisdiction)														
	VI #	Code	Status Frm/To	Value	OJ	QTY	Property Description				Make/Model		Serial Number		
Officer/ID#		<i>CHAUSTIT, MICHAEL (3141)</i>													
Invest ID#		<i>(0)</i>				Supervisor							<i>DUPONTY, FRANK T (1951)</i>		
Status	Complainant Signature			Case Status <i>Cleared By Arrest</i>				<i>10/28/2023</i>				Case Disposition:		Page 1	

INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 23-005907

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
SIMS, F.C. (2301), CHAUSTIT, M. (3141), CHAUSTIT, M. (3141), CLARK, T.E. (3484)

Suspect Hate / Bias Motivated:

NARRATIVE

REPORTING OFFICER NARRATIVE

Key West Police Department

OCA
23-005907
Date / Time Reported
Sat 10/28/2023 02:50

Victim	Offense
Society	DISORDERLY CONDUCT

-- Aidan Ryan Minnick Arrest Narrative:

On October 28, 2023, I (Ofc. M. Chaustit) was assigned to the 200 block of Duval Street. At approximately 0235 hours, I saw two white males later identified as Aiden Minnick and Bennett Brodsky actively fighting in front of Shorty's Market (215 Duval Street).

Minnick and Brodsky continued to throw punches at each other as I approached them. As I was making contact with them they fell to the ground and continued fighting. I grabbed onto Brodsky and pulled him away from Minnick. Minnick and Brodsky both attempted to continue striking each other. I utilized my department issued OC spray and delivered a one second stream to both Brodsky and Minnick's forehead to stop them from fighting. I pulled Brodsky to the ground by his right arm to control him. The OC spray took approximately two to three seconds to take effect and both suspects stopped fighting. I contacted communications and requested KWFD Rescue to meet us at Old City Hall to decontaminate and evaluate Brodsky and Minnick.

Brodsky and Minnick were handcuffed and walked to Old city hall for processing without further incident.

Brodsky and Minnick were both actively fighting on the sidewalk at 215 Duval Street which is in violation of Florida Statute 877.03

-- Bennett Alexander Brodsky Arrest Narrative:

On October 28, 2023, I (Ofc. M. Chaustit) was assigned to the 200 block of Duval Street. At approximately 0235 hours, I saw two white males later identified as Aiden Minnick and Bennett Brodsky actively fighting in front of Shorty's Market (215 Duval Street).

Minnick and Brodsky continued to throw punches at each other as I approached them. As I was making contact with them they fell to the ground and continued fighting. I grabbed onto Brodsky and pulled him away from Minnick. Minnick and Brodsky both attempted to continue striking each other. I utilized my department issued OC spray and delivered a one second stream to both Brodsky and Minnick's forehead to stop them from fighting. I pulled Brodsky to the ground by his right arm to control him. The OC spray took approximately two to three seconds to take effect and both suspects stopped fighting. I contacted communications and requested KWFD Rescue to meet us at Old City Hall to decontaminate and evaluate Brodsky and Minnick. Lt. Dean responded to Old City Hall for the use of force and completed his documentation.

Brodsky and Minnick were handcuffed and walked to Old city hall for processing without further incident.

Brodsky and Minnick were both actively fighting on the sidewalk at 215 Duval Street which is in violation of Florida Statute 877.03

Incident Report Suspect List

Key West Police Department

OCA: 23-005907

1	Name (Last, First, Middle) <i>MINNICK, AIDAN RYAN</i>					Also Known As					Home Address <i>1214 5TH AVE - 43B NEW YORK, NY 10029</i>				
	Business Address														
DOB	Age	Race	Sex	Eth	Hgt	Wgt	Hair	Eye	Skin	Driver's License / State					
<i>11/21/2002</i>	<i>20</i>	<i>W</i>	<i>M</i>	<i>N</i>	<i>600</i>	<i>180</i>	<i>BRO</i>	<i>BRO</i>	<i>LGT</i>	<i>627392586 NY</i>					
Scars, Marks, Tattoos, or other distinguishing features															
Reported Suspect Detail															
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 Plate / State			VIN				
Notes							Physical Char								

2	Name (Last, First, Middle) <i>BRODSKY, BENNETT ALEXANDER</i>					Also Known As					Home Address <i>11435 N PINEHURST CIR MEQUON, WI 53092</i>				
	Business Address														
DOB	Age	Race	Sex	Eth	Hgt	Wgt	Hair	Eye	Skin	Driver's License / State					
<i>10/10/2003</i>	<i>20</i>	<i>W</i>	<i>M</i>	<i>N</i>	<i>600</i>	<i>185</i>	<i>BRO</i>	<i>BRO</i>	<i>LGT</i>	<i>B6320610337000 WI</i>					
Scars, Marks, Tattoos, or other distinguishing features															
Reported Suspect Detail															
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 Plate / State			VIN				
Notes							Physical Char								

