

Response to Resistance Report

Key West Police Department

Case No: 23-5935

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:	_____ Pulling Away/Running Away _____ _____	<input checked="" type="checkbox"/> Physical Control <input type="checkbox"/> Non-lethal Weapon <input type="checkbox"/> Deadly Force	Takedown _____ _____

10. Last Name: Mortimer **11. First:** Kyle **12. Race:** W **13. Sex:** M

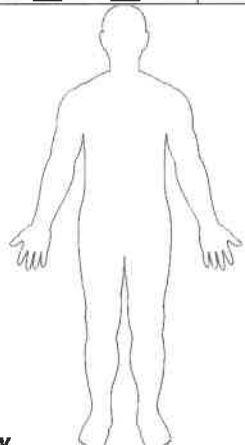
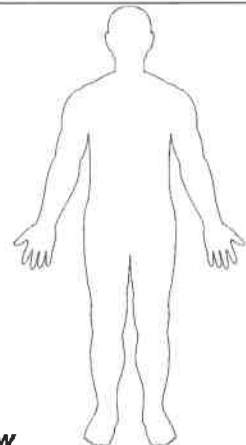
14. DOB: 7/5/2003 **15. Height:** 5'10 **16. Weight:** 165

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
		

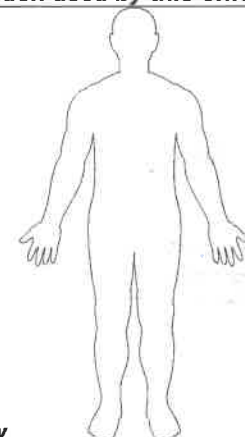
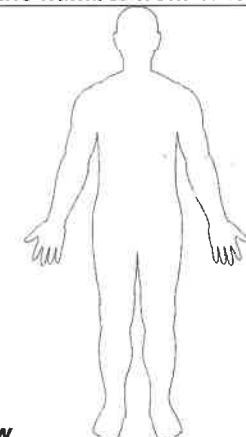
23. Officer: Michael Chaustit **24. Race:** A **25. Sex:** M **26. Age:** 45 **27. Height:** 6ft **28. Weight:** 250

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 type="checkbox"/> Detailed description of injury complaints and/or observed injuries <input 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 <i>Jeffrey Dean</i>		48. Preparing Supervisor / Signature / ID <i>Jeff Dean 3886</i>		49. Date <i>11/11/23</i>	
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 <i>[Signature]</i>		52. Date <i>11/17/24</i>	

INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 23-005935

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)

Suspect Hate / Bias Motivated:

NARRATIVE

REPORTING OFFICER NARRATIVE

Key West Police Department

OCA
23-005935
Date / Time Reported
Sun 10/29/2023 00:55

Victim <i>Society</i>	Offense <i>DISORDERLY CONDUCT</i>	Date / Time Reported <i>Sun 10/29/2023 00:55</i>
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On October, 29, 2023, I was assigned to the intersection of Duval Street Charles Street. At about 0115 hours, I was flagged down about a white male in a banana costume urinating on the side of a building directly across from the porta pottys on Charles Street.

I made contact with the white male in the banana costume, who was later identified as Kyle Mortimer, while he was urinating on the sidewalk. I identified myself as Key West Police and told him to stop. Mortimer immediately fled toward Duval Street. Ofc. Torrecillas told Mortimer to stop. Mortimer began zig zagging to prevent Ofc. Torrecillas from Stopping him. Ofc. Torrecillas grabbed onto Mortimer and stopped him before he got to Duval Street. Mortimer twisted his body and pulled away from Ofc. Torrecillas. I grabbed onto Mortimer's right arm and shoulder then pinned him against a wall on the south side of Charles Street to gain control of him. Mortimer continued to pull away from me and free his right arm from my grip. I utilized a leg sweep to take Mortimer to the ground and gain control of him. Once on the ground Mortimer interlaced his fingers and held them tightly together to prevent Ofc. Torrecillas and I from handcuffing him. I was able to get Mortimer's hands behind his back and handcuff him.

I got Mortimer to his feet and walked him over to Old City Hall, located at 510 Green Street, for processing.

LT. Dean was notified and responded to Old City Hall for the response to resistance. Prior to making contact with Mortimer I pressed the activation button on my BWC. It was knocked off at some point during this incident. I retrieved my BWC from the ground and it was powerd down. I tried to reactivate my BWC but was unable to do so.

Incident Report Suspect List

Key West Police Department

OCA: 23-005935

1	Name (Last, First, Middle) <i>MORTIMER, KYLE MATTHEW</i>					Also Known As					Home Address <i>22 LAUREL RD WESTON, MA 02493</i>				
	Business Address														
DOB	Age	Race	Sex	Eth	Hgt	Wgt	Hair	Eye	Skin	Driver's License / State					
<i>07/05/2003</i>	<i>20</i>	<i>W</i>	<i>M</i>	<i>N</i>	<i>510</i>	<i>165</i>	<i>BRO</i>	<i>BRO</i>	<i>LGT</i>						
Scars, Marks, Tattoos, or other distinguishing features															

<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 Plate / State		VIN	

Notes Physical Char

