

# Response to Resistance Report

Key West Police Department

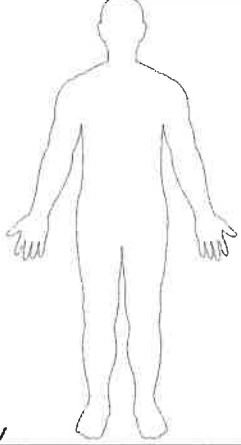
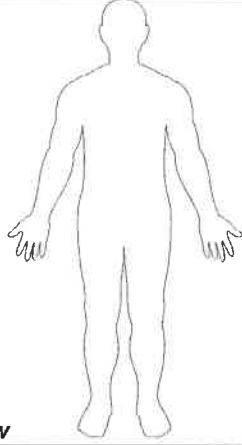
Case No: 23-0666

**1. A Response to Resistance Report will be completed by the supervisor for:** (Check all that apply)

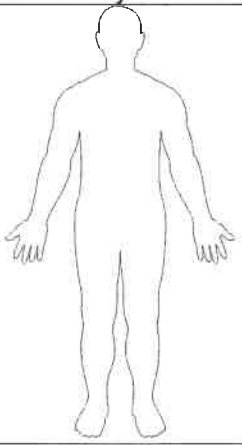
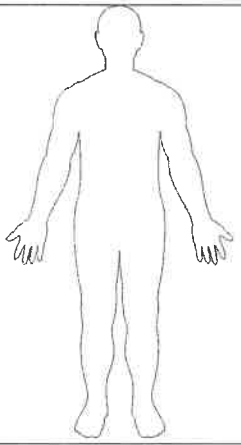
A response through the use of non-lethal weapons,  
 Applies weaponless physical force of strikes, kicks, or "take-downs"  
 When any person sustains an apparent substantial or fatal injury as a result of the application of force  
 When any person complains of injury as a result of the application of force  
 Discharge of firearm in the line of duty off-duty or on-duty (other than for training, maintenance or ballistics testing)

<b>INCIDENT</b>	<b>2. Date:</b> 02/02/2023	<b>3. Time:</b> 0130	<b>4. Location:</b> 781 Palm Ave	<b>5. Incident type:</b> S20
	<b>6. Resistance Level</b>	<b>7. Explanation</b>	<b>8. Response Option</b>	<b>9. Explanation</b>
	<input checked="" type="checkbox"/> Passive: <input checked="" type="checkbox"/> Active: <input checked="" type="checkbox"/> Aggressive: <input type="checkbox"/> Deadly Force:	Lying still in roadway Pulling arms away Pushing	<input checked="" type="checkbox"/> Physical Control <input type="checkbox"/> Non-lethal Weapon <input type="checkbox"/> Deadly Force	Straight arm takedown   

<b>10. Last Name:</b> Shaw	<b>11. First:</b> Samuel	<b>12. Race:</b> W	<b>13. Sex:</b> M
<b>14. DOB:</b> 08/30/1981	<b>15. Height:</b> 5'11"	<b>16. Weight:</b> 165	
<b>17. Did you observe the subject:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If NO, explain why in Section 42. If "YES", complete sections 18-22			
<b>18. Appeared to be:</b> <input type="checkbox"/> Intoxicated <input type="checkbox"/> Under the influence of controlled substance <input checked="" type="checkbox"/> Emotionally / mentally disturbed			
<b>19. Injuries:</b> <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 22 )			
<b>20. Photographed:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <b>21. Treated:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>By:</b> <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital <input type="checkbox"/> Detention			

<b>SUBJECT</b>	 <b>22. Anterior View</b>	 <b>Posterior View</b>
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<b>23. Officer:</b> Elam Thornbrugh	<b>24. Race:</b> W	<b>25. Sex:</b> M	<b>26. Age:</b> 29	<b>27. Height:</b> 6'01"	<b>28. Weight:</b> 204
<b>29. Duty Status:</b> <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 <b>30. Yrs Exp:</b> 7					
<b>31. Injuries:</b> <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)					
<b>32. Photographed:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>33. Treated:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>By:</b> <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital					
<b>34. Response option used by this officer:</b> Straight arm takedown					


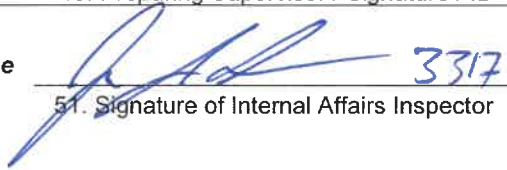
<b>OFFICER</b>	 <b>35. Anterior View</b>	 <b>Posterior View</b>
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# Response to Resistance Report (continued)

Key West Police Department

Case No: 23-0666

<b>TASER USE ONLY</b>	<b>36. TASER® device serial #</b>		<b>37. TASER® device serial #</b>		
	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"/> <b>38. Check and list any additional TASER® devices, cartridges or details in the incident description section.</b>					
<b>REPORT</b>	<b>39. Offense/Incident Report and/or Warrant Affidavit must include:</b>				
	<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.				
<b>SUPERVISOR'S INQUIRY</b>	<b>40. Notified Date:</b> 02/02/2023		<b>41. Time:</b> 0200 hours		
	<b>42. Did you respond to the scene:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	<b>43. Did you watch all relevant videos associated with the use of force?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	<b>44. Did you meet with the Officer(s):</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	<b>45. During your review did you find any potential policy violations or training issues associated with the incident?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)				
	<b>46. Were you able to locate any independent witnesses:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)				
	Name		Address		Phone Number
Sgt. Karl Malsheimer		 3388		2/2/23	
47. Preparing Supervisor / Printed Name		48. Preparing Supervisor / Signature / ID		49. Date	
<b>INT. AFF.</b>	<b>50. Did the review of this incident conclude that use of force was in compliance with Departmental policy?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		 3317		
			51. Signature of Internal Affairs Inspector		
				52. Date 3/8/2023	



# INCIDENT/INVESTIGATION REPORT

I N C I D E N T  D A T A	Agency Name <i>Key West Police Department</i>			Case# <b>23-000666</b>			
	ORI <i>FL0440100</i>						Date / Time Reported <i>02/02/2023 01:28 Thu</i>
	Location of Incident <i>781 PALM AVE, Key West FL 33040</i>			Gang Relat <b>NO</b>	Premise Type <i>Highway/road/alley/st</i>	Beat/GP <b>B3, GPB3</b>	Last Known <i>Secure</i> <i>02/02/2023 01:28 Thu</i>
				At Found <i>02/02/2023 01:28 Thu</i>			
M O	#1	Crime Incident(s) <i>Baker / Marchman Act</i> <i>ZOJ</i>		( Com )	Weapon / Tools		Activity
					Entry	Exit	Security
	#2	Crime Incident		( )	Weapon / Tools		Activity
					Entry	Exit	Security
	#3	Crime Incident		( )	Weapon / Tools		Activity
					Entry	Exit	Security

V I C T I M	# of Victims <i>0</i>		Type:				Injury:			Domestic: <b>N</b>		
	Victim/Business Name (Last, First, Middle)		Victim of Crime #		DOB	Race	Sex	Relationship To Offender		Resident Status		Military Branch/Status
	<b>V1</b>				Age							
	Home Address						Email			Home Phone		
	Employer Name/Address						Business Phone			Mobile Phone		
VYR	Make	Model	Style	Color	Lic/Lis		VIN					

O T H E R S	CODES: V- Victim (Denote V2, V3) WI = Witness IO = Involved Other RP = Reporting Person (if other than victim)													
	Type: <b>INDIVIDUAL</b>													
	Code	Name (Last, First, Middle)				Victim of Crime #	DOB	Race	Sex	Relationship To Offender		Resident Status		Military Branch/Status
	<b>IO</b>	<i>SHAW, SAMUEL FREDERICK</i>					<i>08/30/1981</i>	<i>W</i>	<i>M</i>			<i>Resident</i>		
	Home Address						Email			Home Phone				
<i>617 COUNTRY CLUB AVE - NE FORT WALTON BEACH, FL 32547</i>									<i>305-509-0474</i>					
Employer Name/Address						Business Phone			Mobile Phone					
<i>Show Time Charter, N/A (CHARTER BOAT CA)</i>														
Type:														
Code	Name (Last, First, Middle)				Victim of Crime #	DOB	Race	Sex	Relationship To Offender		Resident Status		Military Branch/Status	
						Age								
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
		27	EVID	\$0.00		1	FLEET AXON				AXON/Incar		5244
		27	EVID	\$0.00		1	RECORDINGS AUDIO/VIDEO				AXON/Bwc		4303
Officer/ID# <i>THORNBRUGH, ELAM (4303)</i>													
Invest ID# <i>(0)</i>						Supervisor <i>REVOREDO, NICK (2962)</i>							
Complainant Signature						Case Status <i>Cleared As Other</i>			Case Disposition:			Page 1	
						<i>02/02/2023</i>							



# INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 23-000666

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

Suspect Hate / Bias Motivated:

NARRATIVE





REPORTING OFFICER NARRATIVE

Key West Police Department

OCA
23-000666
Date / Time Reported
Thu 02/02/2023 01:28

Victim	Offense
	BAKER / MARCHMAN ACT

On 2/2/2023 at approximately 0130 hours, I Officer Thornbrugh alongside Officer Torrecillas were driving on Palm Ave when the following occurred.

I observed a white male run in the roadway and in front of my vehicle while throwing his arms up and yelling "help!" I parked my car to assist the male. As I exited the vehicle the male ran up to me and pushed me into the car door. I grabbed the male by the arm and performed a straight arm bar take down. While on the ground I attempted to place handcuffs on the male. The male resisted by pulling his hands away from my grasps. I was eventually able to detain the male. I attempted to assist the male to his feet so I could relocate him to the sidewalk and out of the roadway. The male refused all verbal orders given and planked his body on the ground. Ofc. Torrecillas and I physically lifted the male to his feet and relocated him out of the roadway where he would be safe.

I identified the male by his Florida driver`s license as Samuel Shaw. Samuel stated that he was kidnapped, hit on the head with a blunt object, his phone stolen, and was being held in a bunker adjacent to the marina. Samuel stated several times "shoot me."

Samuel`s vehicle was parked in the parking lot with all the windows down and roof open. Samuel had all his personal belongings inside the vehicle, except for his keys and phone.

Samuel stated he has been staying with his friend Anthony at the marina. Samuel further stated that Anthony is the dock manager of the marina and lives on the back of the property in a house with red lights. Further into our conversation Samuel stated he hit his head on something, and that he was not struck. Samuel stated he did not know what happened, how he hit his, or how he ended up in Key West. I did not observe any physical injuries to his head. Samuel stated he woke up and called Anthony to bring food home for him from downtown. Samuel also stated his phone and keys were in Anthony`s house, contradictory to his previous statements.

I placed Samuel into protective custody, I feared without immediate care that Samuel was likely to cause harm to himself or others.

Samuel turned over his vehicle to his friend Anthony who was on scene.

Anthony stated that Samuel has been going through a lot of emotional stress lately and was unaware of any mental health issues. Anthony stated he had allowed Samuel to stay the evening at his house because Samuel needed a place to sleep.

My body camera was not activated right away because of how fast the incident occurred, beginning with Samuel shoving me into the vehicle door as I exited. I turned on my body camera as soon as it was safe for Samuel and myself to do so.

I transported Samuel to Lower Key`s Medical Center where he was turned over to medical staff.

BWC (4303) remained activated for the duration of the events.

