# Response to Resistance Report Key West Police Department

| 1. A      | Response to Resistance Report will be com   | pleted by the supe      | rvisor for: (Check all ti          | hat apply)           |
|-----------|---|-------------------------|------------------------------------|----------------------|
|           | A response through the use of non-lethal weapons,   |                         |                                    |                      |
| $\bowtie$ | Applies weaponless physical force of strikes, kicks,  |                         |                                    |                      |
|           | When any person sustains an apparent substantial  |                         |                                    |                      |
| H         | When any person complains of injury as a result of the  |                         |                                    |                      |
|           | Discharge of firearm in the line of duty off-duty or or 2. Date: 11/14/2022 3. Time: 2020 hrs | 4. Location: 1300 15    |                                    |                      |
| _         | 6. Resistance Level 7. Explanation  |                         | sponse Option 9. Explana           |                      |
| NCIDENT   | Passive: Tensing, pulling awa   | _                       |                                    | ep takedown          |
| 용         | Active:   | .,                      | Non-lethal Weapon                  | cp takedown          |
| ž         | Aggressive:   |                         | Deadly Force                       |                      |
|           | Deadly Force:   |                         | Boadly 1 olde                      |                      |
|           | 10. Last Name: Weber  | 11. First: Preston      | 12. Race: W                        | 13. Sex: M           |
|           | <b>14. DOB</b> : 09/21/1968   | 15. Height: 5'06"       | 16. Weight: 150                    |                      |
| 9         | 17. Did you observe the subject: No X Yes   | If NO, explair          | why in Section 42. If "YES", com   | plete sections 18-22 |
|           |   |                         | ed substance 🔲 Emotionally / mo    |                      |
|           | 19. Injuries: No Evident Alleged (If E  |                         |                                    |                      |
|           | 20. Photographed: No Yes 21. Treated:   | ☐ No ☐ Yes <i>By:</i> ☐ | EMT/Paramedic on scene H           | ospital 🔀 Detention  |
|           | *( )  |                         | ( )                                |                      |
| SUBJECT   |   |                         | 2 <                                |                      |
| BJE       | Abrasions   | \                       | f                                  |                      |
| SU        | ADIASIONS   | \                       | // //                              |                      |
|           |   | 1                       |                                    |                      |
|           | rul   | and and                 | Sul link                           |                      |
|           | am /  | 0009                    | and my                             |                      |
|           |   |                         | 1 / 1                              |                      |
|           |   |                         |                                    |                      |
|           | ) ] [ (   |                         | ) ] [ (                            |                      |
|           | 22. Anterior View   | Posterior V             |                                    |                      |
|           | 23. Officer: Erik Roberts 24. Race: W   |                         |                                    | Weight: 300          |
|           |   | a duty employment       |                                    | 30. Yrs Exp: 1 yr    |
|           |   |                         | cribe and indicate areas on charts |                      |
|           | 32. Photographed: No Yes 33. Treated 34. Response option used by this officer: Leg Sv         | No Yes By               | EMT/Paramedic on scene             | Hospital             |
|           | 34. Response option used by this officer. Leg 3v  | veep rakedown           |                                    |                      |
|           | \$ 2  |                         | 5 {                                |                      |
| ER.       |   |                         |                                    |                      |
| OFFICER   | / A A \   |                         | / A A \                            |                      |
| Ö         | $\mathcal{L}$   |                         |                                    |                      |
|           |   |                         | 201 11                             |                      |
|           | Well with   |                         | That I have                        |                      |
|           | \ A \   |                         | 1 1                                |                      |
|           | ) () (  |                         | 1 () (                             |                      |
|           | \ / \ /   |                         | (/)/                               |                      |
|           | 35. Anterior View   | Posterior Vi            | iew U                              |                      |

Case No: 22-6517

# Response to Resistance Report (continued) Key West Police Department

|                | 36. TASER® device serial #   |  | 37. TASER® device serial #  |                      |    |
|----------------|--|--|---|----------------------|----|
|                | TASER®Cam serial#  |  | TASER®Cam serial #  |                      |    |
|                | Cartridge 1 serial #   |  | Cartridge 1 serial #  |                      |    |
| בׁ             | Cartridge 2 serial #   |  | Cartridge 2 serial #  |                      |    |
| O              | Number of cycles:  |  | Number of cycles:   |                      |    |
| SE             | Type of contact: ☐ Probe ☐ CC  | DS Drive Stun  | Type of contact: ☐ Probe ☐ CODS [   | ☐ Drive Stun         |    |
| R<br>C         | Did probes penetrate skin: ☐ Yes   | □ No   | Did probes penetrate skin: ☐ Yes ☐ N  | No                   |    |
| TASER USE ONLY | Target distance at probe launch:   |  | Target distance at probe launch:  |                      |    |
| 4              | Distance between probes:   |  | Distance between probes:  |                      |    |
|                | Probes removed by (name):  |  | Probes removed by (name):   |                      |    |
|                | Device downloaded by:  |  | Device downloaded by:   |                      |    |
|                | 38. Check and list any addition  | onal TASER® device   | ces, cartridges or details in the inciden   | t description sectio | n. |
| REPORT         | <ul> <li>☑ Details outlining the response to</li> <li>☑ Detailed description of injury coo</li> <li>☑ Details outlining the decontaming</li> </ul> | words, mannerisms a<br>presistance utilized by<br>mplaints and/or observ | nd actions that justify the use of force.<br>each officer.<br>red injuries<br>cal treatment provided to the officer and/or su | bject.               |    |
|                | 40. Notified Date: 11/14/2022  | Carrier Carrier  | 41. Time: 2020  |                      |    |
|                | 42. Did you respond to the scene   | : No 🛛 Ye  | es (If "No", explain why)   |                      |    |
|                |  |  |   |                      |    |
|                | 43. Did you watch all relevant vid   | eos associated with  | the use of force? 🔲 No 🔀 Yes (if "No", ex   | plain why)           |    |
| 9              |  |  |   |                      |    |
| _              | 44. Did you meet with the Officer(   | 's): 🗌 No 🛚 Yes (I   | f "No", explain why)  |                      |    |
| S S            |  |  |   |                      |    |
| INQUIRY        | 45. During your review did you fi  | nd any potential poli  | cy violations or training issues associated   | with the incident?   |    |
| တ              | ☐ No ☒ Yes (If "Yes," list b   | 4.00   | <del>*************************************</del>  |                      |    |
| Ķ              | 06.28 BWC  |  |   |                      |    |
| VISOR          | BWC was activated late, however  | in-car camera canti  | ured the incident   |                      |    |
|                | 46. Were you able to locate any ir   |  |   |                      |    |
| SUPER          | Name   | idependent withesse  | Address (If "Yes," list below)  | Phone Number         |    |
| S              | Name   |  | 71441555  | THORE WAITIBE        |    |
|                |  |  |   |                      | -  |
|                |  |  |   |                      |    |
|                |  |  |   |                      |    |
|                | 47. Is further review recommende   | ed: No Tyes  | 3755  | 11/14/2022           |    |
|                | FORWARD COMPLETED ORIGINAL REPORT  |  | 48. Preparing Supervisor's Signature / ID   | 49. Date             |    |
|                | 50. Did the review of this incident  | conclude that use  |   |                      |    |
| F              | of force was in compliance with L  | epartmental  |   |                      |    |
| INT. AFF       | policy? No Yes If "No", con  | -  | 51. Signature of Internal Affairs Inspector   | 52. Date             |    |
| - 4            | 53 If section 48 is "No" record th   | a Professional Stans   | larde Control Number: 54 Da   | te Entered           |    |

Case No: 22-6517

|        | Ag    | ency l   | Vame                              |                         |        |          |                   | יוו ו                       | ACID          | אבי     | I/INV                       | E51               | IGATI               | ON            |         | C                  | ase#             | 2 00 55              |        |                            |
|--------|-------|----------|-----------------------------------|-------------------------|--------|----------|-------------------|-----------------------------|---------------|---------|-----------------------------|-------------------|---------------------|---------------|---------|--------------------|------------------|----------------------|--------|----------------------------|
|        |       | Ì        | Key We                            | est Police I            | Эерс   | artmer   | ıt                |                             |               |         | REPO                        | DRT               |                     |               |         | - D                |                  | 2-0065<br>me Report  |        |                            |
| I      | OR    | l        |                                   | Et 0.440                | 100    |          |                   | 1                           |               |         |                             |                   |                     |               |         |                    |                  | 11/14/2              | 2022   | 20:15 Mon                  |
| N<br>C | ,     |          | . 61 1                            | FL0440                  | 100    |          |                   |                             | D 1 (1)       |         |                             |                   |                     | -             | /O.D.   | _ La               | ast Kno          | wn Secure            |        | 20:15 Mon                  |
| I      |       |          | of Incide                         | CT Apt. 50,             | Kov    | Wost     | FI 3304           |                             | G Relat       |         | ise Type<br>g <i>hway /</i> | Stroo             | <sub>+/</sub>       | Beat<br>B5, C |         | A                  | t Found          |                      |        |                            |
| D<br>E |       | Cr       | me Incid                          |                         | Hey    | 77 COL   | 1 1 3307          | (Com)                       |               |         |                             |                   | GUN/T               |               |         |                    |                  | 11/14/2              | :022   | 20:15 Mon<br>Activity      |
| N<br>T | #1    | AS       |                                   | Threats                 |        |          |                   |                             | Entry         |         | 1171                        | LIEL              | Exit                | OI G          | UIV     |                    | Secur            | rity                 |        |                            |
| D      | _     | SC       | me Incid                          | lent                    |        |          |                   | (Com)                       | Weapo         | on / T  | oole                        |                   |                     |               |         |                    |                  |                      | Г      | Activity                   |
| Α      | #2    |          |                                   | rest / Escape           | е      |          |                   | (Com)                       |               |         |                             |                   | E.S                 |               |         |                    |                  |                      |        | richtricy                  |
| T<br>A |       |          | DM                                |                         |        |          |                   |                             | Entry         |         |                             |                   | Exit                |               |         |                    | Secur            | ity                  |        |                            |
|        | #3    | Cri      | me Incid                          | lent                    |        |          |                   | ( )                         | Weapo         |         | ools                        |                   |                     |               |         |                    |                  |                      |        | Activity                   |
|        |       |          |                                   |                         |        |          |                   |                             | Entry         |         |                             |                   | Exit                |               |         |                    | Secur            | rity                 |        |                            |
| МО     |       |          |                                   |                         |        |          |                   |                             |               |         |                             |                   |                     |               |         |                    |                  |                      |        |                            |
| _      | и     | CAUCA    |                                   | Tumor                   | DID    | II II DI | TAT.              |                             |               |         | T                           |                   |                     | _             |         |                    |                  |                      |        |                            |
|        | # 01  |          | ms 5                              | Type:<br>siness Name (I |        |          |                   |                             |               | Т       | Victim of                   | Non               | OOB T               | Race          | Sex     | Relatio            | onship           | Domesti-<br>Resident |        | Military                   |
| V      | V     |          |                                   | CHRISLOR                |        |          |                   |                             |               |         | Crime #                     | 06/0              | 1/1987              |               |         | To Of              |                  |                      |        | Branch/Status              |
| C      | Но    | me A     | ddress                            |                         |        |          |                   |                             |               |         |                             | Emai              | 35                  | В             | M       | <u>NE</u>          |                  | Resid                |        | Phone                      |
| T      | 12    | 13 1-    | 4TH ST                            | r - LOT 265             | , Ke   | y West   | , FL 330          | 40-                         |               |         |                             | Lina              | '                   |               |         |                    |                  |                      |        | 5-832-9210                 |
| M      | En    | ploye    | r Name/                           | Address                 | ī      | INIKNI   | OWN A             | NKNOW.                      | <b>N.</b> /.) |         |                             |                   |                     | Bus           | siness  | Phone              |                  |                      | Mobi   | le Phone                   |
|        | V     | 'R       | Make                              | Model                   |        |          | tyle              | Color                       | 1             | Lic/I   | Lis                         |                   |                     | VII           | N .     |                    |                  |                      |        |                            |
|        | -00   | NDE0     | 37.37                             | (D) (A)                 | 2 172) | 17/7     | 1777              | 10. 1                       | 1 10          |         |                             |                   |                     | (10 1         |         |                    |                  |                      |        |                            |
|        |       |          | V- VIC                            | tim (Denote V           | 2, V3) | ) WI     | = Witness         | IO = Invo                   | olved Ot      | ther    |                             | Reporti<br>: Non  | ng Person           | (if otl       | her tha | an victi           | m)               |                      |        |                            |
| O<br>T | Cod   | 1        |                                   | st, First, Middle       | e)     |          |                   |                             |               |         | Victim of                   |                   | OB                  | Race          |         |                    | onship           | Resident             | Status | Military                   |
| H<br>E | $V_2$ | 1 77     | ILLIAN                            | MS, ROYAN               |        |          |                   |                             |               | -   '   | Crime #                     |                   | 5/1976              | D             |         | To Of<br><i>ST</i> | fender           | n : .l               |        | Branch/Status              |
| R      |       |          | ddress                            |                         |        |          |                   |                             |               |         | 1                           | Emai              | 46                  | В             | M       | 31                 |                  | Resid                |        | Phone                      |
| S      |       |          | <i>4TH ST</i><br>r Name/ <i>i</i> | 7 - 109 KEY             | WE.    | ST, FI   | 33040             |                             |               |         |                             |                   |                     | I Page        | inace   | Phone              |                  |                      |        | <i>3-484-4858</i> le Phone |
| I      | Li    | іріоус   | i Name/                           | Addiess                 |        |          | UNK (U            | NK)                         |               |         |                             |                   |                     | Dus           | 5111055 | rnone              |                  |                      |        | 3-484-4858                 |
| N<br>V | _     |          | NDIVI                             |                         |        |          |                   |                             |               |         |                             | : Non             |                     |               |         |                    |                  |                      |        |                            |
| 0      | Cod   | "   m    |                                   | t, First, Middle        |        | DWA      | NF.               |                             |               |         | Victim of<br>Crime #        |                   | OB<br>5/1989        | Race          |         | Relation<br>To Off | onship<br>fender | Resident             | Status | Military<br>Branch/Status  |
| L<br>V | V3    |          |                                   | = -                     |        |          |                   |                             |               |         | 1                           | Age               | 33                  | В             | M       | ST                 |                  | Resid                |        |                            |
| E<br>D |       |          | ddress<br>4TH ST                  | - B KEY W               | EST    | FL 3     | 3040              |                             |               |         |                             | Emai              | 1                   |               |         |                    |                  |                      |        | Phone 5-684-9342           |
|        |       |          | r Name/                           |                         |        |          | -000-0-0 Date     |                             |               |         |                             |                   |                     | Bus           | siness  | Phone              |                  |                      | Mobi   | e Phone                    |
|        | I. =  | = Lost   | S = Sto                           | olen R = Rec            | overe  | d D=     | UNK (U<br>Damaged |                             | B = F         | Burnec  | d C = C                     | ounterf           | eit / Forge         | ed F          | = For   | ınd                |                  |                      | 30.    | 5-684-9342                 |
|        |       |          |                                   |                         |        |          |                   | Other Jurisdi               |               |         |                             | 1                 |                     |               |         |                    |                  |                      |        |                            |
| -      | #     | Code     |                                   | Value                   | OJ     |          |                   |                             | y Descr       | ription |                             |                   |                     | Ma            | ike/M   | odel               |                  |                      | Seria  | l Number                   |
| -      |       | 35       | EVID                              | \$0.00                  |        | 2        |                   | C S36A 4194<br>EET S36A 419 |               |         |                             |                   | AXON/Bw             |               |         |                    |                  |                      |        |                            |
| P      |       | 35<br>99 | EVID<br>EVID                      | \$0.00<br>\$0.00        |        | 5        |                   | PTURE PHO                   |               |         |                             |                   | AXON/Fle<br>AXON/Ca |               |         |                    |                  |                      |        |                            |
| R      |       | 35       | EVID                              | \$0.00                  |        | 1        |                   | CAR S36A 41                 |               |         |                             |                   | AXON/In-c           |               |         |                    |                  |                      |        |                            |
| OP     |       |          |                                   |                         |        |          |                   |                             |               |         |                             |                   |                     |               |         |                    |                  |                      |        |                            |
| E<br>R | _     |          |                                   |                         | -      |          |                   |                             |               |         |                             |                   |                     |               |         |                    |                  |                      |        |                            |
| T      |       |          |                                   |                         |        |          |                   |                             |               |         |                             |                   |                     |               |         |                    |                  |                      |        |                            |
| Y      |       |          |                                   |                         |        |          |                   |                             | -             |         |                             |                   |                     |               |         |                    |                  |                      |        |                            |
|        |       |          |                                   |                         |        |          |                   |                             |               |         |                             |                   |                     |               |         |                    |                  |                      |        |                            |
|        |       | -        |                                   |                         |        |          |                   |                             |               |         |                             |                   |                     |               |         |                    |                  |                      |        |                            |
|        | Off   | icer/Il  | D#                                | ROBERTS                 | ERII   | X /2     | 1194)             |                             |               | _       |                             |                   |                     |               |         |                    |                  |                      |        |                            |
|        | _     | est ID   |                                   | (0)                     |        |          |                   |                             |               |         |                             |                   | Supervis            | or            |         |                    |                  | (0)                  |        |                            |
| Status | Cor   | nplair   | ant Sign                          |                         |        |          | Case              | Case Status                 |               |         |                             | Case Disposition. |                     |               |         |                    |                  |                      |        |                            |

# **Incident Report Additional Name List**

Key West Police Department

OCA: 22-006517

## Additional Name List

|    | Name Code/# | Name (Last, First, Middle)                       | Victim of<br>Crime # | DOB                | Age   | Race | Sex            |
|----|-------------|--|----------------------|--------------------|-------|------|----------------|
| 1) | VI 4        | FERNANDO, PAULWELL PEDRO                         | 1                    | 01/02/1978         | 44    | В    | $\overline{M}$ |
|    | Addre       | ss 1213 14TH ST Apt. B, KEY WEST, FL 33040-      |                      | <b>н</b> : 305-67  | 6-177 | 2    |                |
|    | Empl/Ad     | dr Unk   |                      | B:                 |       |      |                |
|    |             |  | Mo                   | bile #:            |       |      |                |
| 2) | VI 5        | Society  | 2                    |                    |       |      |                |
|    | Addre       | ss   |                      | H:                 |       |      |                |
|    | Empl/Ad     | dr   |                      | В:                 |       |      |                |
|    |             |  | Mo                   | bile #:            |       |      |                |
| 3) | IO I        | FALKE, AMANDA SUZANNE                            |                      | 02/24/1981         | 41    | W    | F              |
|    | Addre       | ss 1300 15TH CT LOT Apt. 50, KEY WEST, FL 33040- |                      | <b>H</b> : 305-92. | 3-063 | 8    |                |
|    | Empl/Ad     | dr Denny's                                       |                      | В: 305-29          | 4-506 | 5    |                |
|    |             |  | Mo                   | bile #:            |       |      |                |

## **INCIDENT/INVESTIGATION REPORT**

Key West Police Department Case # 22-006517

| Statu<br>Code | is L= | = Lost  | S = Stolen R = Re | covered D = Dan | naged Z = Seized B = Burned C = Counterfeit / I | Forged F = Found                |
|---------------|-------|---------|-------------------|-----------------|---|---------------------------------|
|               | UCR   | Status  | Quantity          | Type Measure    | Suspected Type                                  | Up to 3 types of activity       |
|               |       |         |                   |                 |   |                                 |
| D             |       |         |                   |                 |   |                                 |
| R             |       |         |                   |                 |   |                                 |
| U             |       |         |                   |                 |   |                                 |
| G<br>S        |       |         |                   |                 |   |                                 |
|               |       |         |                   |                 |   |                                 |
|               |       |         |                   |                 |   |                                 |
|               |       |         |                   |                 |   |                                 |
|               |       |         |                   |                 |   |                                 |
|               |       |         |                   |                 |   |                                 |
|               | Assis | ting Of | ficers            |                 |   |                                 |
|               |       |         |                   | RECILLAS, J. (3 | 3759), CONATY, J.T. (3755), REVOREDO            | D. N. (2962). ROSCOE, R. (4011) |
|               |       |         | OVA, A. (4193)    | ,,              | , (,  | , (),, ( / 0 / 1),              |

Suspect Hate / Bias Motivated:

## **INCIDENT/INVESTIGATION REPORT**

| Narr. (cont.) OCA: 22-006517 | Key West Police Department |
|------------------------------|----------------------------|
| NARRATIVE                    |                            |
|                              |                            |

#### REPORTING OFFICER NARRATIVE OCA Key West Police Department 22-006517 Offense Date / Time Reported RICHE, CHRISLORD JEAN ASSAULT / THREATS Mon 11/14/2022 20:15

On Monday 11/14/2022 at approximately 2017 hrs. I (Ofc. E. Roberts) responded to 1300 15th Ct. (Poinciana Trailer Park) Lot 50 reference a man brandishing a firearm.

On arrival I was flagged down by Chrislord Riche and Royan Williams who were pointing to Preston Weber who was standing on the front porch of the residence with Amanda Falke. Riche and Williams yelled "He has the gun! It's him!", still pointing at Weber. I Weber stepped down from the porch and began to approach me. I ordered him to stop. He complied and stated that he did not have a gun. I attempted to place hand cuff restaints on Weber and he attempted to pull away from my custodial hold to defeat being restrained. I then utilized a leg sweep technique and redirected Weber to the ground where I applied the hand cuff restraints. I searched Weber's person and found no weapons. He continuously stated that he had no firearms in his possession.

I then spoke with Williams who told me the following:

Victim

Williams, Riche, Michael Hamilton and Paulwell Fernando were standing outside in the street behind two adjacent driveways (Belonging to Riche and Weber) when Weber came from inside his residence and entered his van. Weber then began to rev the engine. When he exited the van, he brandished what was described as a "9mm" handgun at the men. Williams drew his own concealed weapon in defense, fearing for the safety of his friends as well as himself. Weber then sat it on the rear bumper, picked it up and walked away between the van and the trailer. It was at this time Williams called 911.

Williams' story was corroborated by Riche, Hamilton and Fernando. Riche also stated that Weber pointed his gun directly at him.

I spoke with Falke who told me that she was inside the kitchen of the residence during the altercation and was unsure of the events that occurred outside.

After Miranda advisement Weber persisted that he was not in possession of any weapons. He provided consent to search his house, as well as his van. A search of the house yielded no result. Upon searching the inside of Weber's van Ofc. J. Rojas located a black in color plastic replica made in the style of a beretta 9mm handgun lying on a shelf. Photographs were taken of the weapon and uploaded to Evidence.com via the Axon capture App. The replica cycled with a functional slide and trigger. It was collected and submitted to the KWPD Property Division,

Due to the facts and evidence stated above I found probable cause that Preston Weber did willingly and knowingly Assault Chrislord Riche, Royan Williams, Michael Hamilton and Paulwell Fernando by using what appeared to be a firearm to cause a well-founded fear for their safety contrary to FS 784.011-Assault. All victims refused to pursue charges against Weber and provided refusal forms that were submitted to the KWPD Records Division.

Due to Weber's physical resistance and attempting to defeat hand cuff restraints I find probable cause that Preston Weber did willingly and knowingly resist or oppose an officer or other person legally authorized to execute process in the execution of legal process or in the lawful execution of any legal duty, without offering or doing violence to the person of the officer contrary to FS 843.02-Resisting without violence.

Weber was transported to the Monroe County Detention Center in my patrol car.

My Axon In-Car Recording System was activated during transport and uploaded to Evidence.com.

My Axon BWC was activated during this incident and Uploaded to Evidence.com.

My Axon Fleet Recording System was activated during this incident and uploaded to Evidence.com.

Reporting Officer: ROBERTS, ERIK R CS3NC

### REPORTING OFFICER NARRATIVE

| r                          | EI OKTING OFFICER NARRATIVE | OCA                  |
|----------------------------|-----------------------------|----------------------|
| Key West Police Department |                             | 22-006517            |
| Victim                     | Offense                     | Date / Time Reported |
| RICHE, CHRISLORD JEAN      | ASSAULT / THREATS           | Mon 11/14/2022 20:15 |
|                            |                             |                      |

# **Incident Report Suspect List**

Key West Police Department

OCA: 22-006517

| 1 | Name (Last, First, WEBER, PR Business Address | ESTON       |        |          | MEC    | HANIC, A |       | Know  |     |        |           | 130<br>KE | Address<br>0 15TH CT LC<br>Y WEST, FL 33<br>-923-9907 |     |
|---|---|-------------|--------|----------|--------|----------|-------|-------|-----|--------|-----------|-----------|---|-----|
|   | DOB   | Age         | Race   | Sex      | Eth    | Hgt      | Wgt   | Н     | air | Eye    | Skin      | Drive     | 's License / State.                                   |     |
|   | 09/21/1968                                    | 54          | W      | M        | N      | 506      | 18    | 0     | BRO | BRO    | LGT       | W1        | 60677683410 1   | FL  |
|   | Scars, Marks, Ta                              | ttoos, or o |        |          |        | ures     |       |       |     |        |           |           |   |     |
|   | Reported Susp                                 | ect Det     | ail Si | ispect A | ge     | R        | tace  | Sex   | Eth | Heigh  | ıt        | Weig      | ht  | SSN |
|   | Weapon, Type                                  | Featur      | re     | Mak      | e      | N        | lodel |       |     | Colo   | )r        | Caliber   | Dir of Travel<br>Mode of Travel                       |     |
|   | VehYr/Make/Mod                                | lel         |        | Dr       | s Styl | е        | (     | Color |     | Lic/St |           |           | VIN   | •   |
|   | Notes   |             |        |          |        |          |       |       |     | F      | hysical C | har       |   |     |

# **Incident Report Related Property List**

Key West Police Department

OCA: 22-006517

| 1 | Property Description      |            |      |       | Make    |        |     | Model   |       |        | Caliber |
|---|---------------------------|------------|------|-------|---------|--------|-----|---------|-------|--------|---------|
|   | AXON BWC S36A             | 4194       |      |       | AXON    |        |     | BWC     |       |        |         |
|   | Color                     | Serial No. |      | Value |         |        | Qty |         | Unit  | Juriso | liction |
|   |                           |            |      |       |         | \$0.00 |     | 2.000   | EA.   |        | Locally |
|   | Status                    | Date       | NIC# |       | State # |        |     | Local # | -110- | OAN    |         |
|   | Evidence                  | 11/14/2022 |      |       |         |        |     |         |       |        |         |
|   | Name (Last, First, Middle | e)         |      |       |         | DOB    |     |         | Age   | Race   | Sex     |
|   | * No name *               |            |      |       |         |        |     |         |       |        |         |

<u>Notes</u>

| 2 | Property Description      |            | Make |       |         |        | Model |         |      | Caliber |         |
|---|---------------------------|------------|------|-------|---------|--------|-------|---------|------|---------|---------|
| - | AXON FLEET S36            | A 4194     |      |       | AXON    |        |       | FLEE    | ET . |         |         |
|   | Color                     | Serial No. |      | Value |         |        | Qty   | -1      | Unit | Jurisd  | iction  |
|   |                           |            |      |       |         | \$0.00 |       | 1.000   | EA.  |         | Locally |
|   | Status                    | Date       | NIC# | 11    | State # |        |       | Local # | -17  | OAN     |         |
|   | Evidence                  | 11/14/2022 |      |       |         |        |       |         |      |         |         |
|   | Name (Last, First, Middle | )          |      |       |         | DOB    |       |         | Age  | Race    | Sex     |
|   | * No name *               |            |      |       |         |        |       |         |      |         |         |

**Notes** 

| Property Description |            |  |       | Make    |        |     | Model   |      |        | Caliber |
|----------------------|------------|--|-------|---------|--------|-----|---------|------|--------|---------|
| AXON CAPTU           | RE PHOTOS  |  |       | AXON    |        |     | CAPT    |      |        |         |
| Color                | Serial No. |  | Value |         |        | Qty |         | Unit | Jurisd | iction  |
|                      |            |  |       |         | \$0.00 |     | 5.000   | EA.  |        | Locally |
| Status               | tatus Date |  |       | State # |        | 7   | Local # |      | OAN    |         |
| Evidence             | 11/14/2022 |  |       |         |        |     |         |      |        |         |
| Name (Last, First, M | iddle)     |  |       |         | DOB    |     | F       | \ge  | Race   | Sex     |
| * No name *          |            |  |       |         |        |     |         |      |        |         |

<u>Notes</u>

| 4 | Property Description      |                       |      |       | Make    |       |     | Model   |      |        | Caliber |
|---|---------------------------|-----------------------|------|-------|---------|-------|-----|---------|------|--------|---------|
| • |                           | AXON IN-CAR S36A 4194 |      |       |         |       |     | IN-C    |      |        |         |
|   | Color                     | Serial No.            |      | Value |         |       | Qty |         | Unit | Juriso | diction |
|   |                           |                       |      |       | 5       | 50.00 |     | 1.000   | EA   |        | Locally |
|   | Status                    | Date                  | NIC# |       | State # |       |     | Local # | •    | OAN    |         |
| , | Evidence                  | 11/14/2022            |      |       |         |       |     |         |      |        |         |
| ĺ | Name (Last, First, Middle | )                     |      |       |         | DOB   |     |         | Age  | Race   | Sex     |
|   | * No name *               |                       |      |       |         |       |     |         |      |        |         |

Notes

## CASE SUPPLEMENTAL REPORT

NOT SUPERVISOR APPROVED

OCA: 22006517

Printed: 11/14/2022 22:51

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

Investigator: ROJAS BURGOS, JESUS (4250)

Date / Time: 11/14/2022 21:25:50, Monday

Supervisor: (0)

Supervisor Review Date / Time: NOT REVIEWED

Contact:

Reference: General Supplemental Report

On 11/14/2022, at approximately 2020 hours, Ofc. Torrecillas and I (Ofc. Rojas) responded to 1300-81 15th CT (Poinciana trailer park), reference an armed subject. On arrival I assisted Ofc. Roberts by searching for a handgun, the victims said the subject had threatened them with. We received consent from the subject, identified as Preston Weber and is girlfriend Amanda Falke whom live together, to search the home and Weber's work truck parked on the same property.

After searching the residence, I searched the interior of Weber's truck and located a realistic replica of a black 9mm handgun, located on a shelf near the back interior of the truck. I notified Ofc. Torrecillas about the toy gun and Ofc. Roberts took photographs of the toy gun and its surroundings for evidence.

I collected the toy gun and transported it to the Key West Police Department. I submitted it to the Evidence and Property Department as evidece.

My body worn camera (BWC) was activated.

End Supplemental.

Investigator Signature:\_\_\_\_\_\_

OCA: 22-006517

| 1 | Property Description       |            |      |       | Make    |        |     | Model   |       |        | Caliber |
|---|----------------------------|------------|------|-------|---------|--------|-----|---------|-------|--------|---------|
|   | BWC 4250                   |            |      |       | AXON    |        |     |         |       |        |         |
|   | Color                      | Serial No. |      | Value |         |        | Qty |         | Unit  | Jurisd | ction   |
|   |                            |            |      |       |         | \$0.00 |     | 1.000   |       |        | Locally |
|   | Status                     | Date       | NIC# |       | State # |        |     | Local # |       | OAN    |         |
|   | Evidence                   | 11/14/2022 |      |       |         |        |     |         |       |        |         |
|   | Name (Last, First, Middle) |            |      |       | DOB     |        |     |         | Age I | Race   | Sex     |
|   | * No name *                |            |      |       |         |        |     |         |       |        |         |

Notes

| Proper          | Property Description |            |      |       | Make <b>BUZZBEE</b> |       |     | Model   | Model  |        |         |
|-----------------|----------------------|------------|------|-------|---------------------|-------|-----|---------|--------|--------|---------|
| TOY 9MM HANDGUN |                      |            |      |       |                     |       |     | TOY GUN |        |        |         |
| Color           |                      | Serial No. |      | Value |                     |       | Qty |         | Unit   | Jurisd | iction  |
|                 | Black                |            |      |       | \$                  | 15.00 |     | 1.000   |        |        | Locally |
| Status          |                      | Date       | NIC# | 17:   | State #             |       |     | Local # |        | OAN    |         |
|                 | Evidence             | 11/14/2022 |      |       |                     |       |     |         |        |        |         |
| Name            | (Last, First, Middle | )          |      |       | 1634                | DOB   |     | I A     | Age    | Race   | Sex     |
| Wei             | Weber, Preston Scott |            |      |       | 09/21/19            |       |     | 1968    | 068 54 |        | M       |

<u>Notes</u>