

1. CRB Control #
22-003

COMPLAINT FORM Citizen Review Board

PO Box 1946, Key West, FL 33041
<http://www.cityofkeywest-fl.gov>
[email: crb@cityofkeywest-fl.gov](mailto:crb@cityofkeywest-fl.gov)
(305) 809-3887 Fax (305) 293-9827

2. Day, Date, Time
Complaint Received 3:50 pm
9/6/2022
3. KWPD Control System #

Please provide as much information as you can about the incident(s). Use additional pages if necessary.
Suministre la mayor cantidad de información posible acerca del (de los) incidente(s). Utilice páginas adicionales si fuese necesario

A. COMPLAINANT INFORMATION DATOS DEL DENUNCIANTE

Name: ~~Denise Williams~~ Denise Williams Date of Birth: 5/27/74
Nombre Fecha de nacimiento

Address: KOTS
(Dirección) Street (Ciudad) City (Estado) State (Código Postal) Zip

Mailing Address: _____
Dirección postal PO Box or Street, City, State and Zip

E-Mail Address: _____
(Dirección e-mail)

Home Phone: (____) _____ Work Phone: (____) _____ Cellular: (602) 563-4272
Teléfono Particular Teléfono del Trabajo Celular

B. NATURE OF COMPLAINT: Naturaleza de la denuncia:

Battery Rudeness Deficient Service Truthfulness Driving False Arrest Excessive Force Searches Other

C. INFORMATION ABOUT THE OFFICER(S) INVOLVED IN THE INCIDENT DATOS DEL (DE LOS) OFICIAL (ES) INVOLUCRADO(S) EN EL INCIDENTE

Name: _____ Badge #: _____ Vehicle #: _____
Nombre Placa No: Patrulla No.

Please provide a physical description of officer:
Describe la apariencia física del oficial: _____

Name: _____ Badge #: _____ Vehicle #: _____
Nombre Placa No: Patrulla No.

Please provide a physical description of officer:
Describe la apariencia física del oficial: _____

Name: _____ Badge #: _____ Vehicle #: _____
Nombre Placa No: Patrulla No.

Please provide a physical description of officer:
Describe la apariencia física del oficial: _____

D. VICTIM/WITNESS INFORMATION
DATOS DE LA VICTIMA/TESTIGO

Did you witness the incident? Yes ___ No ___
¿Fue usted testigo del incidente denunciado? Si ___ No ___

If you are filing a complaint on behalf of someone else, what is your relationship, if any, to the person(s):
Si usted está presentando una denuncia en nombre de otra(s) persona(s), indique cuál es su relación, si la hay, con esa(s) persona(s):

Parent ___ Spouse ___ Relative ___ Guardian ___ Child ___ Friend ___ Other ___
Padre/Madre ___ Conyuge ___ Familiar ___ Tutor ___ Hijo/a ___ Amigo/a ___ Otra ___

Please provide as much of the following information as you can about the person(s) on whose behalf the complaint is filed and any witness(es) to the incident:
Suministre la mayor cantidad posible de la información que se solicita a continuación, sobre la (las) persona(s) en nombre de la(s) cual(es) presenta la denuncia, y sobre el (los) testigo(s) del incidente:

Victim/Witness #1

Victima/Testigo No. 1

Is this person a: victim ___ witness ___

Esta persona es: víctima ___ testigo ___

Name: Ms. Summers POJ 871-1033
Nombre _____
Address: Sherriff Domestic Violence City _____ State _____
Dirección: _____ Ciudad: _____ Estado: _____
Zip Code _____ Contact numbers: Telephone _____ Cell _____
Código Postal _____ Teléfono _____

Victim/Witness #2

Victima/Testigo No. 2

Is this person a : victim ___ witness ___

Esta persona es: víctima ___ testigo ___

Name: _____
Nombre _____
Address: _____ City _____ State _____
Dirección: _____ Ciudad: _____ Estado: _____
Zip Code _____ Contact numbers: Telephone _____ Cell _____
Código Postal _____ Teléfono _____

Victim/Witness #3

Victima/Testigo No. 3

Is this person a : victim ___ witness ___

Esta persona es: víctima ___ testigo ___

Name: _____
Nombre _____
Address: _____ City _____ State _____
Dirección: _____ Ciudad: _____ Estado: _____
Zip Code _____ Contact numbers: Telephone _____ Cell _____
Código Postal _____ Teléfono _____

E. INFORMATION ABOUT THE INCIDENT
INFORMACION ACERCA DEL INCIDENTE

Please provide as much information as possible, using additional pages if necessary.
Suministre la mayor cantidad de informacion posible, utilizando páginas adicionales si fuese necesario.

Date: 9/8/22 Time: _____ Location: _____ Case # if applicable: _____
Fecha: 9/8/22 Hora: _____ Lugar: _____ No. de Caso, si corresponde: _____

In summary Mrs. Williams states that she is being stalked by Michelle and Whitney (last names unknown). She also states that a police officer, Erik Roscits, harasses her at Casa Marina. They are also trying to turn her boyfriend, Delroy Chapman, against her. She claims she has reported the above to (CWP) and they have provided deficient service. She states Whitney is either an undercover police officer or an informant. She also states the stalking and harassment started when she lived in Tampa and continued when she moved to Newark.

Attach additional pages if necessary. Page number ____ of ____ pages of narrative

Are you being prosecuted for this incident or do you have a pending criminal case? Yes ____ No ____

Have you ever been convicted of a felony? Yes ____ No ____

"I hereby certify that, to the best of my knowledge, and under the penalty of perjury, the statements made herein are true." I hereby acknowledge and understand that any documents, materials, medical records, e-mail and other communication delivered to the CRB office becomes public record and shall be viewable on the internet by anyone or any entity. You have been advised that any statement made to the CRB can be used by other governmental entities.

Signature of Complainant

Date signed

Complaint Received by: _____

Complaint Reviewed by: _____

Action Taken: _____

Date complaint forwarded to Chief of Police: _____

E. INFORMATION ABOUT THE INCIDENT
INFORMACION ACERCA DEL INCIDENTE

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Date: _____ Time: _____ Location: _____ Case # if applicable: _____
Fecha: _____ Hora: _____ Lugar: _____ No. de Caso, si corresponde: _____

Michelle stalking her & Whitney - (C.I. & informant) A couple years.
Office Erik Roberts - Police harassing her
Tyra boyfriend on her - Delroy Champma
Casa Marina - short ballad head.
→ Police setting her up to go to jail.
People stalking her Michelle gives homeless people
to stalk her
~~Det. from TA~~ Charles Manson harasser her.
Started in Tampa then New York
Whitney Pagan - Tampa

~~In summary Ms. Williams feels K.W.P.D. is providing deficient service.
she reports that she has complained to K.W.P.D. that Michelle and Whitney.
she says she hangs out at Casa Marina IP~~

Attach additional pages if necessary. Page number ____ of ____ pages of narrative
Are you being prosecuted for this incident or do you have a pending criminal case? Yes ____ No ____
Have you ever been convicted of a felony? Yes ____ No ____

"I hereby certify that, to the best of my knowledge, and under the penalty of perjury, the statements made herein are true." I hereby acknowledge and understand that any documents, materials, medical records, e-mail and other communication delivered to the CRB office becomes public record and shall be viewable on the internet by anyone or any entity. You have been advised that any statement made to the CRB can be used by other governmental entities.

Donna _____ 9/5/2022
Signature of Complainant Date signed

Complaint Received by:	Complaint Reviewed by:	Action Taken:
Date complaint forwarded to Chief of Police: _____		