

# Response to Resistance Report

Key West Police Department

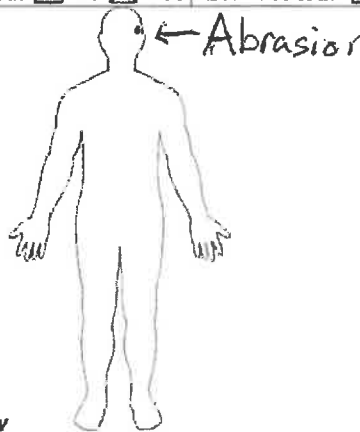
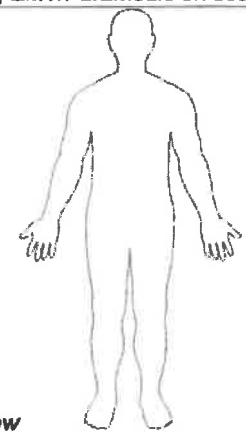
Case No: 18-7283

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

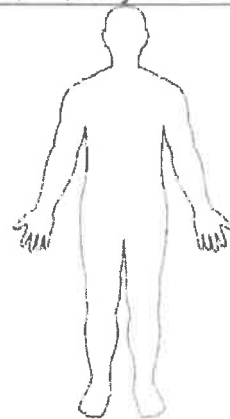
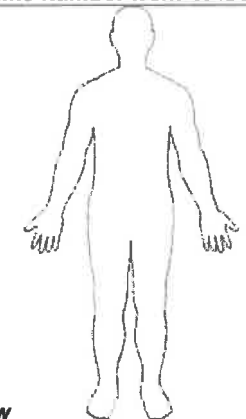
- ☐ A response through the use of non-lethal weapons,  
☒ Applies weaponless physical force of strikes, kicks, or "take-downs"  
☐ When any person sustains an apparent substantial or fatal injury as a result of the application of force  
☐ When any person complains of injury as a result of the application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

INCIDENT	2. Date: 12/23/2018	3. Time: 2129 Hrs	4. Location: 3841 N. Roosevelt	5. Incident type: S34/S31
	6. Resistance Level		7. Explanation	8. Response Option
	<input checked="" type="checkbox"/> Passive:	Would not comply		<input checked="" type="checkbox"/> Physical Control
	<input checked="" type="checkbox"/> Active:	Actively pulled away to evade		<input type="checkbox"/> Non-lethal Weapon
	<input type="checkbox"/> Aggressive:	arrest		<input type="checkbox"/> Deadly Force
	<input type="checkbox"/> Deadly Force:			

SUBJECT	10. Last Name: Ferrez	11. First: Jeffrey	12. Race: H	13. Sex: M
	14. DOB: 02/19/1999	15. Height: 5-07	16. Weight: 140	
	17. Did you observe the subject: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If NO, explain why in Section 42. If "YES", complete sections 18-22			
	18. Appeared to be: <input type="checkbox"/> Intoxicated <input checked="" type="checkbox"/> Under the influence of controlled substance <input type="checkbox"/> Emotionally / mentally disturbed			
	19. Injuries: <input type="checkbox"/> No <input checked="" type="checkbox"/> Evident <input type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 22)			
	20. Photographed: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes 21. Treated: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Detention			

SUBJECT	 <p>22. Anterior View</p>	 <p>Posterior View</p>
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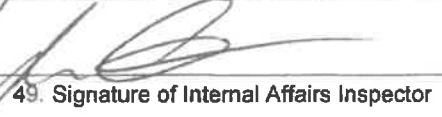
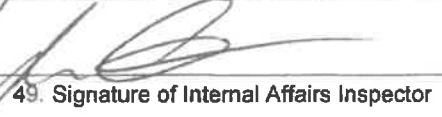
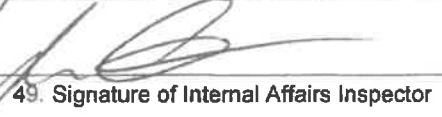
OFFICER	23. Officer: Anthony Gillespie	24. Race: W	25. Sex: M	26. Age: 49	27. Height: 5-11	28. Weight: 260
	29. Duty Status: <input checked="" type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment <input checked="" type="checkbox"/> Uniformed <input type="checkbox"/> Plain clothes					
	30. Yrs Exp: 2.5					
	31. Injuries: <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)					
32. Photographed: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes 33. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital						
34. Response option used by this officer: (If TASER®, also reference line number from TASER® section) 36						

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

Key West Police Department

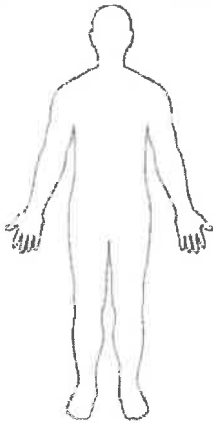
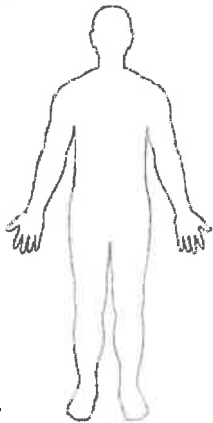
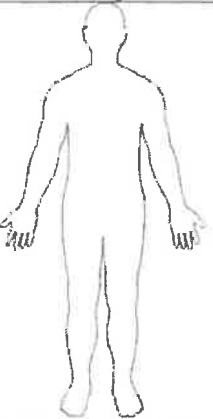
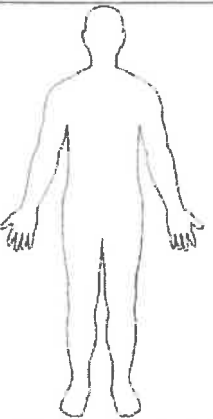
Case No: 18-7283

TASER USE ONLY	<b>36. TASER® device serial #</b>	<b>37. TASER® device serial #</b>												
	TASER®Cam serial #	TASER®Cam serial #												
	Cartridge 1 serial #	Cartridge 1 serial #												
	Cartridge 2 serial #	Cartridge 2 serial #												
	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): N/A	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	<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.													
SUPERVISOR'S INQUIRY	<b>40. Notified Date:</b> 12/23/2018													
	<b>41. Time:</b> 2130 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 meet with the Officer:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)													
<b>44. Were you able to locate any independent witnesses:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "Yes," list below)														
<table border="1"><thead><tr><th>Name</th><th>Address</th><th>Phone Number</th></tr></thead><tbody><tr><td>Raymond C. Bryne</td><td>1711 Seminary Street, Key West, FL 33040</td><td>(305) 699-7108</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></tbody></table>			Name	Address	Phone Number	Raymond C. Bryne	1711 Seminary Street, Key West, FL 33040	(305) 699-7108						
Name	Address	Phone Number												
Raymond C. Bryne	1711 Seminary Street, Key West, FL 33040	(305) 699-7108												
<b>45. Is further review recommended:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS														
<table border="1"><tr><td><b>46. Preparing Supervisor's Signature / ID</b></td><td><b>47. Date</b></td></tr><tr><td> 3317</td><td>12/23/2018</td></tr></table>			<b>46. Preparing Supervisor's Signature / ID</b>	<b>47. Date</b>	 3317	12/23/2018								
<b>46. Preparing Supervisor's Signature / ID</b>	<b>47. Date</b>													
 3317	12/23/2018													
INT. AFF.	<b>48. 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 (If "No", complete section 51)													
	<table border="1"><tr><td><b>49. Signature of Internal Affairs Inspector</b></td><td><b>50. Date</b></td></tr><tr><td> 11/3/19</td><td></td></tr></table>		<b>49. Signature of Internal Affairs Inspector</b>	<b>50. Date</b>	 11/3/19									
<b>49. Signature of Internal Affairs Inspector</b>	<b>50. Date</b>													
 11/3/19														
<b>51. If section 48 is "No" record the Professional Standards Control Number:</b>														
<b>52. Date Entered:</b>														

**Response to Resistance Report (continued)**

Key West Police Department

Case No: 18-7283

<b>OFFICER</b>	<b>23. Officer:</b> Matthew Hansell <b>24. Race:</b> W <b>25. Sex:</b> M <b>26. Age:</b> 45 <b>27. Height:</b> 5-7 <b>28. Weight:</b> 175							
	<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						<b>30. Yrs Exp:</b> 14+	
	<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: (If TASER®, also reference line number from TASER® section)</b>								
<b>OFFICER</b>								
	<b>35. Anterior View</b>				<b>Posterior View</b>			
	<b>23. Officer:</b> <b>24. Race:</b> <b>25. Sex:</b> <b>26. Age:</b> <b>27. Height:</b> <b>28. Weight:</b>							
	<b>29. Duty Status:</b> <input type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment <input type="checkbox"/> Uniformed <input type="checkbox"/> Plain						<b>30. Yrs Exp:</b>	
<b>31. Injuries:</b> <input 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 type="checkbox"/> No <input type="checkbox"/> Yes <b>33. Treated:</b> <input 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: (If TASER®, also reference line number from TASER® section)</b>								
<b>OFFICER</b>								
	<b>35. Anterior View</b>				<b>Posterior View</b>			

# INCIDENT/INVESTIGATION REPORT

INCIDENT DATA

Agency Name <b>Key West Police Department</b>		INCIDENT/INVESTIGATION REPORT		Case# <b>18-007283</b>	
ORI <b>FL0440100</b>				Date / Time Reported <b>12/23/2018 21:14 Sun</b>	
Location of Incident <b>3841 N Roosevelt Blvd, Key West FL 33040-</b>				Last Known Secure <b>12/23/2018 21:14 Sun</b>	
Premise Type <b>Hotel / Motel Other</b>		Beat/GP <b>B5, GPB5</b>		At Found <b>12/23/2018 21:14 Sun</b>	
#1	Crime Incident(s) <b>Drug Possession Controlled Substance DRA</b>	(Com)		Weapon / Tools <b>NOT APPLICABLE/NONE</b>	
			Entry		Exit
			Security		Activity
#2	Crime Incident <b>Obstruction Of Justice XOX</b>	(Com)		Weapon / Tools	
			Entry		Exit
			Security		Activity
#3	Crime Incident <b>Trespassing XOT</b>	(Com)		Weapon / Tools	
			Entry		Exit
			Security		Activity

MO

VICTIM

# of Victims <b>2</b>		Type: <b>BUSINESS</b>		Injury:		Domestic: <b>N</b>	
Victim/Business Name (Last, First, Middle) <b>V1 MARIOTT BEACHSIDE</b>		Victim of Crime # <b>1,3</b>		DOB <b>// : :</b>		Age	
Home Address <b>3841 N. ROOSEVELT BOULEVARD, Key West, FL 33040-</b>		Home Phone <b>305-296-8100</b>		Business Phone		Mobile Phone	
Employer Name/Address <b>3841 N ROOSEVELT BV</b>		Business Phone		Mobile Phone		VIN	
VYR	Make	Model	Style	Color	Lic/Lis		

OTHERS INVOLVED

CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)							
Type: <b>SOCIETY/PUBLIC/STATE</b>				Injury:			
Code <b>V2</b>	Name (Last, First, Middle) <b>SOCIETY</b>			Victim of Crime # <b>2</b>	DOB <b>//</b>	Race	Sex
Home Address			Home Phone		Resident Status <b>N/A</b>		
Employer Name/Address				Business Phone		Mobile Phone	
Type:				Injury:			
Code	Name (Last, First, Middle)			Victim of Crime #	DOB	Race	Sex
Home Address			Home Phone		Resident Status		
Employer Name/Address				Business Phone		Mobile Phone	

PROPERTY

L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found ("OJ" = Recovered for Other Jurisdiction)							
VI #	Code	Status From/To	Value	OJ	QTY	Property Description	Make/Model
	99	EVID	\$5.00		1	AXON 3648 HANSELL	

Officer/ID#	<b>HANSELL, MATTHEW (3648)</b>		Supervisor	<b>STOCKTON, JOSEPH (3317)</b>	
Invest ID#	<b>(0)</b>				
Status	Complainant Signature	Case Status <i>Cleared By Arrest</i>	Case Disposition: <i>Cleared By Arrest</i>	12/23/2018	Page 1

## Incident Report Additional Name List

Key West Police Department

OCA: 18-007283

### Additional Name List

Name Code/#	Name (Last, First, Middle)	Victim of Crime #	DOB	Age	Race	Sex
1) WI 1	BYRNE, RAYMOND CLARK		03/24/1968	50	W	M
	Address 1711 Seminary St , Key West, FL 33040-		H: 305-699-7108			
	Empl/Addr		B: - -			
			Mobile #: - -			

# INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 18-007283

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
	E	EVI	1.000	GM	MARIJUANA	Poss

Assisting Officers  
 DEAN, J. (3386), GILLESPIE, A.M. (3757), STOCKTON, J. (3317)

Suspect Hate / Bias Motivated:

NARRATIVE

**REPORTING OFFICER NARRATIVE***Key West Police Department*

		OCA 18-007283
Victim MARRIOTT BEACHSIDE	Offense DRUG POSSESSION CONTROLLED	Date / Time Reported Sun 12/23/2018 21:14

On 12-23-2018, I, K-9 Ofc. Matthew Hansell and Ofc. Gillespie, responded to Marriott Beachside Resort in reference to a non guest refusing to leave the hotel property.

Upon arrival, we met with security officer Raymond Byrne and the arrestee Jeffrie Ferrez. Byrne told us Ferrez had been seen on the property two other times today attempting to gain access to a room. Byrne escorted Ferrez off the property each time only to have him return. Byrne requested we trespass Ferrez from the property.

I questioned Ferrez about why he was on the property and he gave several conflicting statements about what room he was staying in and who he was staying with. Byrne told me Ferrez was not a guest of the hotel.

While talking with Ferrez I could smell an odor of marijuana coming from him. I attempted to detain Ferrez and he began to tensed up and pull his hands into his body and turn away from me.

I grabbed Ferrez by the right arm along with Ofc. Gillespie and we completed a take down of Ferrez chest first to the ground. I gave Ferrez several verbal commands to stop resisting and for him to quit pulling his hands into his body. I was finally able to get Ferrez hands out form under him and placed him into hand cuffs.

A search of Ferrez person located approximately one gram of marijuana in a blunt cigar wrap in his back right pocket, as well as loose marijuana in a clear bag in his front right pocket. The marijuana later field testing positive.

Ferrez was taken by Officer Gillespie to his patrol vehicle and placed in the back seat for transport to Lower Keys Medical Center for clearance.

I informed Sgt. Dean of the take down and he along with Sgt. Stockton responded to the scene. I had Byrne fill out a witness statement before leaving for the jail.

Once Ofc. Gillespie arrived at Lower Keys Medical Center, Ferrez continued to resist arrest and tried to tense and pull away from Ofc. Gillespie. Ofc. Gillespie escorted Ferrez back to the ground and held him there until Sgt. Dean and Sgt. Stockton arrived.

Ferrez was later cleared by the ER and transported by Ofc. Gillespie to the Monroe County Jail. The marijuana was placed into evidence.

Ferrez was informed of the trespass and warned not return to Marriott Beachside.

I placed the marijuana, approximatley 2 grams into property and evidence.

My Axon body camera was on for this incident.

Case Status Cleared with Arrest.

# Incident Report Suspect List

Key West Police Department

OCA: 18-007283

1	Name (Last, First, Middle) <b>FERREZ, JEFFRI ANDRES</b>					Also Known As					Home Address <b>2512 EAGLE POINT CT DES MOINES, IA 50320</b>				
	Business Address <b>NONE, NONE</b>														
DOB <b>02/19/1999</b>		Age <b>19</b>	Race <b>W</b>	Sex <b>M</b>	Eth <b>H</b>	Hgt <b>508</b>	Wgt <b>140</b>	Hair <b>BLK</b>	Eye <b>BRO</b>	Skin <b>OLI</b>	Driver's License / State. <b>916AL2714 IA</b>				
Scars, Marks, Tattoos, or other distinguishing features															
<b>Reported Suspect Detail</b>		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/St		VIN				
Notes							Physical Char								



# Incident Report Related Property List

Key West Police Department

OCA: 18-007283

1		Property Description <b>MARIJUANA</b>			Make		Model		Caliber		
Color		Serial No.		Value <b>\$5.00</b>		Qty <b>1.000</b>		Unit <b>GM</b>		Jurisdiction <b>Locally</b>	
Status <b>Evidence</b>		Date <b>12/23/2018</b>		NIC #		State #		Local #		OAN	
Name (Last, First, Middle) <b>Byrne, Raymond Clark</b>						DOB <b>03/24/1968</b>		Age <b>50</b>		Race <b>W</b> Sex <b>M</b>	

Notes

2		Property Description <b>AXON 3648 HANSELL</b>			Make		Model		Caliber		
Color		Serial No.		Value <b>\$5.00</b>		Qty <b>1.000</b>		Unit <b>DU</b>		Jurisdiction <b>Locally</b>	
Status <b>Evidence</b>		Date <b>12/23/2018</b>		NIC #		State #		Local #		OAN	
Name (Last, First, Middle) <b>Byrne, Raymond Clark</b>						DOB <b>03/24/1968</b>		Age <b>50</b>		Race <b>W</b> Sex <b>M</b>	

Notes

**CASE SUPPLEMENTAL REPORT**

Printed: 12/26/2018 09:41

Key West Police Department

OCA: **18007283**

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

Case Status: **CLEARED AS OTHER**Case Mng Status: **NA**Occurred: **12/23/2018**Offense: **VOID**Investigator: **GILLESPIE, ANTHONY M (3757)**Date / Time: **12/23/2018 23:13:11, Sunday**Supervisor: **STOCKTON, JOSEPH (3317)**Supervisor Review Date / Time: **12/24/2018 02:58:08, Monday**

Contact:

Reference: **General Supplemental Report**

On 12/23/2018, at approximately 2114 hours, Officer Hansell and I (Officer Gillespie) responded to 3841 N. Roosevelt Blvd. (Key West Marriott Beachside) in reference to a trespasser on the property.

Upon arrival, I met with Beachside security in the parking area under building 3, who was out with a Hispanic male (later identified as Jeffrey Andres Ferrez). Security informed me he had escorted Ferrez off of the property 3 times previously in the past several hours and would like Ferrez trespasses from the property.

I spoke with Ferrez. Ferrez's story changed several times and was inconsistent. Officer Hansell smelled an odor of Marijuana coming from Ferrez. Ferrez was holding a lap top computer under his hooded sweat shirt. Hansell instructed Ferrez to give him his computer so we could set it aside while we continued with our investigation. Officer Hansell attempted to grab Ferrez's right arm. Ferrez pulled away from Officer Hansell. I grabbed Ferrez by the left arm in an attempt to control him. Ferrez pulled away from me and tensed his arm as I attempted to place his hands behind his back. I redirected Ferrez to the ground, using his left arm, in an attempt to gain control of him.

I assisted Officer Hansell to place hands cuffs on Ferrez's right wrist. Ferrez was laying on his stomach on top of his left arm. I ordered Ferrez to give me his arm, but Ferrez refused. I attempted several times to pull his left arm free. I was finally able to free his left arm, and Officer Hansell placed hand cuffs on his left wrist.

I placed Ferrez into the backseat of my patrol car. I attempted to place the seat belt onto Ferrez and he scooted himself across the rear seat to the other side of the car. I was able to seat belt Ferrez on my second attempt.

I transported Ferrez to Lower Keys Medical Center for medical clearance. After arriving at Lower Keys, I instructed Ferrez to exit my vehicle, but he refused. I called on COMM1 for a secondary unit to respond. Ferrez heard me call for a second unit and decided to exit the car.

I escorted Ferrez toward the entrance of the Hospital. While escorting Ferrez inside, he started to pull away from me and tense up his arms. I told him to stop pulling away from me, but Ferrez continued. Just inside the doorway to the hospital, I initiated a second take down, using his left arm, in order to gain control of Ferrez. Ferrez continued to kick and pull away while laying face down on the floor. Hospital staff requested that I take Ferrez into a hospital room. Hospital staff assisted me in getting Ferrez to a room. While inside the room, on the hospital bed, Ferrez continued to yell, kick, and roll around. Hospital staff had to restrain Ferrez by the feet and left arm, while I restrained Ferrez by his right arm.

The on-duty Emergency Room Doctor medically cleared Ferrez. I transported Ferrez to MCDC without further

Investigator Signature

Supervisor Signature

# CASE SUPPLEMENTAL REPORT

Printed: 12/26/2018 09:41

Key West Police Department

OCA: **18007283**

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

Case Status: *CLEARED AS OTHER*

Case Mng Status: *NA*

Occurred: *12/23/2018*

Offense: *VOID*

Investigator: *GILLESPIE, ANTHONY M (3757)*

Date / Time: *12/23/2018 23:13:11, Sunday*

Supervisor: *STOCKTON, JOSEPH (3317)*

Supervisor Review Date / Time: *12/24/2018 02:58:08, Monday*

Contact:

Reference: *General Supplemental Report*

incident.

I have no further information at the time of this report.///END OF REPORT///

Investigator Signature

Supervisor Signature