

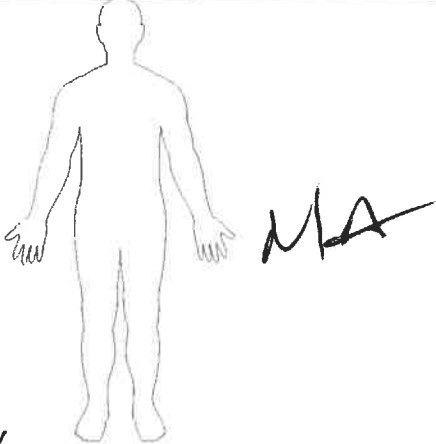

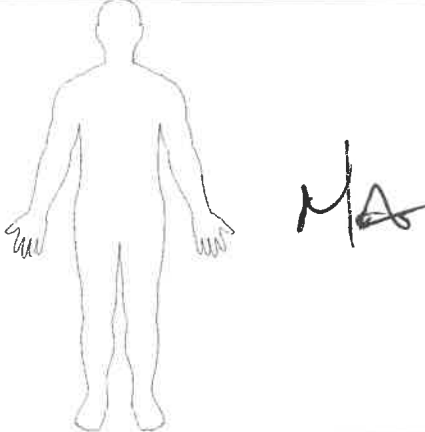
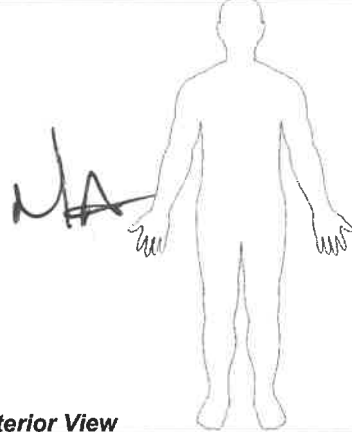
# Response to Resistance Report

Key West Police Department

Case No: 21-0019

## 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: 01/01/21	3. Time: 2230 Hrs	4. Location: Fleming/Duval St	5. Incident type: S83	
	6. Resistance Level	7. Explanation	8. Response Option	9. Explanation	
	<input type="checkbox"/> Passive:		<input checked="" type="checkbox"/> Physical Control	Take Down	
	<input type="checkbox"/> Active:		<input type="checkbox"/> Non-lethal Weapon		
	<input checked="" type="checkbox"/> Aggressive:	Grabbed/pushed/pulled	<input type="checkbox"/> Deadly Force		
	<input type="checkbox"/> Deadly Force:				
SUBJECT	10. Last Name: Schulmann	11. First: Danielle	12. Race: W	13. Sex: F	
	14. DOB: 12/22/89	15. Height: 5' 03"	16. Weight: 110		
	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 checked="" type="checkbox"/> Intoxicated <input type="checkbox"/> Under the influence of controlled substance <input type="checkbox"/> Emotionally / mentally disturbed				
	19. 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 22 )				
	20. Photographed: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes 21. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital <input type="checkbox"/> Detention				
	22. Anterior View		Posterior View		
					
	OFFICER	23. Officer: Denis Agleev	24. Race: W	25. Sex: M	26. Age: 37 27. Height: 5'06"
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: 1					
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: Take-down					
35. Anterior View		Posterior View			
					

# Response to Resistance Report (continued)

Key West Police Department

Case No: 21-0019 Error! Reference source not found.

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): _____	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>														
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> 01/01/21 <b>41. Time:</b> 2230													
	<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)													
<table border="1"><thead><tr><th>Name</th><th>Address</th><th>Phone Number</th></tr></thead><tbody><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></tbody></table>			Name	Address	Phone Number									
Name	Address	Phone Number												
INT. AFF.	<b>47. Is further review recommended:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS</b>													
	<b>48. Preparing Supervisor's Signature / ID</b>  <b>3386</b> <b>01/02/21</b>													
	<b>49. Date</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 If "No", complete section 51													
<b>51. Signature of Internal Affairs Inspector</b>  <b>52. Date</b> 1/19/21														
<b>53. If section 48 is "No" record the Professional Standards Control Number:</b> <b>54. Date Entered:</b>														

**CASE SUPPLEMENTAL REPORT**

Printed: 01/25/2021 13:05

Key West Police Department

OCA: **21000019**

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

Case Status: *CLEARED BY ARREST*Case Mng Status: *NA*Occurred: *01/01/2021*Offense: *RESIST ARREST / ESCAPE*Investigator: *AGLEEV, DENIS (4007)*Date / Time: *01/05/2021 17:08:50, Tuesday*Supervisor: *RODRIGUEZ, PABLO D (2298)*Supervisor Review Date / Time: *01/05/2021 17:10:36, Tuesday*

Contact:

Reference: *General Supplemental Report*

On January 1, 2021 at approximately 2230 hours I, Officer Agleev, was walking down Duval Street as a part of the KWPD New Year Curfew enforcement team.

At the intersection of Duval Street and Fleming Street we met a group of individuals refusing to walk away, thus violating the curfew. Both males and females in the group were very belligerent. At some point I saw other officers engaged in a physical altercation with the group. One of the females, later identified as Danielle Schulmann, started moving towards the officers, which were addressing other members of the group, and thus did not see Danielle. I grabbed the arm of Danielle, preventing her moving further. Danielle started actively pulling away her arm. Danielle was pushing me with another arm at the same time. Danielle ignored my requests to stop resisting. Danielle started applying both her elbows and shoulders, trying to break away. I grabbed Danielle's forearm with both my hands, moved it behind her back, and redirected Danielle to the ground in a controlled manner. Danielle started twisting her body and continued aggressively pulling away her arm. Ofc. S. Ham and I handcuffed Danielle behind the back. While I was walking Danielle to KWPD transport van, she continued pulling away, and repeatedly asked me to take the handcuffs off, so she could fight me.

Danielle Schulmann was placed into the van. Officer Wynn transported Danielle along with other arrestees to the Monroe Country Detention Center.

Since the physical altercation started instantly, I did not have a chance to activate my BWC.

Investigator Signature

Supervisor Signature