

Kathy Schmelz

From: Time to Change- Jersey Style <opra+request-122-9ee484e7@requests.opramachine.com>
Sent: Saturday, November 18, 2017 9:44 PM
To: Kathy Schmelz
Subject: Open Public Records Act request - Different Police Department Annual Summary Reports and recertification certificates for all police officers

Dear Long Branch City,

This is a request for public records made under OPRA and the common law right of access. I certify under penalty of NJSA 2C:28-3 that I have not been convicted of an indictable offense. Please acknowledge receipt of this message.
Records requested:

1. I seek your police department's Internal Affairs Annual Summary Reports for years 2014 to 2017.
2. I seek a copy of the police department's Public Synopsis of Disciplinary Actions for years 2014 to 2017. This report is required pursuant to Requirement 10 of the Attorney General's Internal Affairs Police.
3. I seek a copy of the police department's Vehicular Pursuit Summary Reports for years 2014 to 2017.
4. I would like all of your police department's Use of Force Reports from January 1, 2014 to present date.
5. I would like all of your police department's Police Use of Deadly Force Attorney General Deadly Notification Reports for years 2014 to 2017.
6. I seek the annual basic police academy training, annual firearms requalification training, use of force training, vehicular pursuit training, domestic violence training, cultural diversity training, bias intimidation crimes training, Breathalyzer training, 911 dispatcher and call-taker training, K-9 training recertification certificates for all of the police officers in your police department for the year 2017.

Yours faithfully,

Time to Change- Jersey Style

To: Chief Roebuck
Lt. Shirley
cc: Info Only K. Hayes
Due: Dec. 1st, 2017

Please use this email address for all replies to this request:
opra+request-122-9ee484e7@requests.opramachine.com

Is kschmelz@longbranch.org the wrong address for Open Public Records Act requests to Long Branch City? If so, please contact us using this form:

https://opramachine.com/change_request/new?body=long_branch_city

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:

<https://opramachine.com/help/officers>

USE OF FORCE REPORT

INCIDENT NUMBER:

B. Suspect(s) Information (only those persons who were subject to police use of force)					
Name (Last, First, Middle)	Arrest?				

[Check yes only for injury/hospital
resulting from police use of force]

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply) Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:		☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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Name (Last, First, Middle)		Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Romano Nick		312	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment			
Supervisor Name			Patrol			
Sgt. Passantino			Supervisor Signature			

47015-06
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

A. Incident Information

INCIDENT NUMBER: _____

Date: 4/1/2015	Time: 1415	Day of Week: Monday	Location: 532 Broadway
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify) Crisis Transport			Type of Person: ☐ Under the Influence ☒ Other Type of Call (Specify) Mental/Suicidal

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
	☒ Yes ☐ No	2C:17-3 2C:29-2.3	F	H	37	☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Hands / Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Passantino	Badge # 304	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☒ Yes ☐ No	Taken to Hospital? ☒ Yes ☐ No
Signature <i>[Signature]</i>			Police Officer Assignment Patrol		
Supervisor Name Sgt. Passantino			Supervisor Signature <i>[Signature]</i>		

LONG BRANCH POLICE DEPARTMENT

INCIDENT NUMBER: 1SLB01585

Date: 01/25/15		Time: 1522	Day of Week: Sunday	Location: 136 James St
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☐ Under the Influence	
	☐ Suspicious Person	☐ Traffic Violation	☒ Other Type of Call (Specify)	
	☒ Other Type of Call (Specify) Warrant arrest	☐ Other Dispute	Warrant arrest	
(Check only if unusual condition in person exists)				

2. Suspect(s) Information (only those persons who were subject to police use of force)										
Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?		
Williams, Dwayne	☒ Yes	2C:29-9, 2C:39-5D, 2C:29-2	M	W	24	☐ Yes	☐ Yes	☐ Yes		
	☐ No					☒ No	☒ No			
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes		
	☐ No					☐ No	☐ No			
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes		
	☐ No					☐ No	☐ No			

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] REFUSED TO SUBMIT TO THE ARREST	☐	☐	☐

Type of Force Used: ☒ Compliance Hold		☐ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent		☐ Kicks/Foot	☐ Accidental
☐ Strike/Use Baton or Other Object		☐ Canine	No. of shots fired ____
☐ Other Force. Specify:			No. of hits ____ Use 'UNK' if unknown

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Olson, George, Thomas	326	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
Supervisor Name	PATROL				
Lt. Spencer	Supervisor Signature				
	Lt. Spencer #208				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB06378**

A. Incident Information

Date: 04/04/2015	Time: 1605	Day of Week: SATURDAY	Location: 268 MAC AUTHUR AVE
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
JADER APARECIDO DASILVA	☒ Yes ☐ No	2C:12-1A, ETAL	M	W	42	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
VACCARO, PATRICK RYAN	353	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment		
Supervisor Name			Supervisor Signature		
Sgt. A. Gonzalez					

UF 2015-013
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB06378**

A. Incident Information

Date: 04/04/2015	Time: 1605	Day of Week: SATURDAY	Location: 268 MAC AUTHUR AVE
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
JADER APARECIDO DASILVA	☒ Yes ☐ No	2C:12-1A, ETAL	M	W	42	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Robert C Bell	Badge # 329	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>[Signature]</i>			Police Officer Assignment PATROL SUPERVISOR		
Supervisor Name St. Gonzalez			Supervisor Signature <i>[Signature]</i>		

4+2015-013
LONG BRANCH POLICE DEPARTMENT

353

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB06378**

A. Incident Information

Date: 04/04/2015	Time: 1605	Day of Week: SATURDAY	Location: 268 MAC AUTHUR AVE
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
JADER APARECIDO DASILVA	☒ Yes ☐ No	2C:12-1A, ETAL	M	W	42	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
SERGIO CHAPARRO	352	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No
Signature			Police Officer Assignment		
			PATROL		
Supervisor Name			Supervisor Signature		
Sgt A. Gonzalez					

015-014
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

A. Incident Information

INCIDENT NUMBER: **15LB06424**

Date: 4/5/2015		Time: 0530		Day of Week: Sunday		Location: Rockwell and Union	
Type of Incident:		☒ Crime in Progress		☐ Domestic		Type of Person: ☒ Under the Influence	
		☐ Suspicious Person		☐ Traffic Violation		☐ Other Type of Call (Specify)	
		☐ Other Type of Call (Specify)		☐ Other Dispute			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Racc	Age	Weapon?	Suspect Injured?	Hospital?
Vincent Thoms	☒ Yes ☐ No	Burglary, Poss CDS, Resisting	M	B	40	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used:		☒ Compliance Hold		☐ Hands / Fists		Firearms Discharge:	
		☒ Chemical/Natural Agent		☐ Kicks/Feet		☐ Intentional	
		☐ Strike/Use Baton or Other Object		☐ Canine		☐ Accidental	
		☐ Other Force. Specify:				No. of shots fired ____	
						No. of hits ____	
						Use 'UNK' if unknown	

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
P.O. Patrick Smyth	326	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
		Patrol Z3			
Supervisor Name		Supervisor Signature			
Sgt. Michael Ahar					

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

154806920
INCIDENT NUMBER: 12-370

A. Incident Information

Date: 04-11-2015		Time: 1843	Day of Week: Friday	Location: 224 Third Ave
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence	
	☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)	
	☒ Other Type of Call (Specify) Disorderly Conduct	☐ Other Dispute		
(Check only if unusual condition in person exists)				

[illegible]

Part 2 - Information (only those persons who were subject to police use of force)									
Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?	
Williams, Megan	☒ Yes	Disorderly Conduct Resisting Arrest	F	W	36	☐ Yes	☐ Yes	☒ Yes	☐ No
	☐ No					☒ No			
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes	☐ No
	☐ No					☐ No			
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes	☐ No
	☐ No					☐ No			

[Check yes only for injury/hospital
resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] Verbal Threat on Officer	☒	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force, Specify:		Hands / Fists Kicks/Feet Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
P.O. Boryczewski	346	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
Lt. Boryczewski 346		Patrol			
Supervisor Name		Supervisor Signature			
Lt. Gotfredsen 240		[Signature]			

LONG BRANCH POLICE DEPARTMENT

152B07141

INCIDENT NUMBER: ~~14-280-AR~~

Date: 4-14-15		Time: 1529	Day of Week: Tuesday	Location: 189 Broadway
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☐ Under the Influence	
	☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)	
	☒ Other Type of Call (Specify) Arrestee	☐ Other Dispute		

(Check only if unusual condition in person exists)

15. Suspect (s) information (only those persons who were subject to police use of force)								
Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Locust, William	☒ Yes ☐ No	Contempt, Poss under 50 grams, resisting arrest, agg assault on police	M	B	31	☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:		☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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Name (Last, First, Middle)		Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
P.O. A. Bryszewski		346	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No
Signature			Police Officer Assignment			
Supervisor Name			Supervisor			
Sgt. B. Cahill			Supervisor Signature			

U F 2015-016
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB07140**

A. Incident Information

Date: 04/14/15	Time: 1529	Day of Week: TUESDAY	Location: 189 BROADWAY
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☐ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☒ Other Type of Call (Specify) WARRANT ARREST
☒ Other Type of Call (Specify) WARRANT ARREST		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
LOCUST, WILLIAM A.	☒ Yes ☐ No	AGG. ASSAULT ON POLICE, U/50 GRAMS RESISTING ARREST, CONTEMPT	M	B	31	☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) P.O. J. Pasquelli	Badge # 348	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☒ Yes ☐ No	Taken to Hospital? ☒ Yes ☐ No
Signature <i>[Signature]</i> #348			Police Officer Assignment PATROL		
Supervisor Name SGT. BELL #329			Supervisor Signature <i>[Signature]</i>		

LF2015-017
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

A. Incident Information

INCIDENT NUMBER: 15LB
0885

Date: 05/06/2015	Time: 0106	Day of Week: Wed.	Location: Jack's Goal Line Stand
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☒ Other Dispute			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Akeira Simons	☒ Yes ☐ No	Disorderly Conduct	F	W	21	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☐	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] Public Intoxication/Disorderly	☒	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits <u> </u> Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) VEACHIONE, GARY	Badge # 343	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>[Signature]</i>			Police Officer Assignment Patrol		
Supervisor Name Lt. Jorge Silverio #295			Supervisor Signature <i>[Signature]</i>		

UF2015-018
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB10337**

A. Incident Information

Date: 05/23/15	Time: 1932	Day of Week: Saturday	Location: 81 Avenel Blvd Long Branch
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Davis, Michael T.	☒ Yes ☐ No	Obstruction Resisting Arrest	M	B	31	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☒ Hands / Fists ☒ Chemical/Natural Agent ☒ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify:	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) UMANA, Hector Daniel	Badge # 328	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☒ Yes ☐ No	Taken to Hospital? ☒ Yes ☐ No
Signature <i>[Signature]</i> #328 P.O.			Police Officer Assignment Patrol		
Supervisor Name Sgt. Brendan Cahill			Supervisor Signature <i>[Signature]</i>		

UF2015-018

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB10337

A. Incident Information

Date: 05/23/2015	Time: 1933	Day of Week: SATURDAY	Location: 81 AVENEL BLVD #109
Type of Incident: ☐ Crime in Progress		☒ Domestic	Type of Person: ☐ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☒ Other Type of Call (Specify) DOMESTIC
☐ Other Type of Call (Specify)		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
DAVIS, MICHAEL	☒ Yes ☐ No	2C:29-1A	M	B	31	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
FLORES, LIANNE	☒ Yes ☐ No	2C:29-1A 2C:29-2A(1)	F	H	25	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☒	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold	☐ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental
☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired ____
☐ Other Force. Specify:		No. of hits ____
		Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle) Kim, R. Jung	Badge # 327	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>Kim, R. Jung</i>	Police Officer Assignment PATROL				
Supervisor Name Sgt. B. C. Sullivan	Supervisor Signature <i>Sgt. B. C. Sullivan</i>				

U+2015-018
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB10337

A. Incident Information

Date: 05/23/2015	Time: 1933	Day of Week: SATURADAY	Location: 81 AVENEL BLVD Long Beach
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
DAVIS, MICHAEL T JR	☒ Yes ☐ No	OBSTRUCTION RESISTING ARREST	M	B	31	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

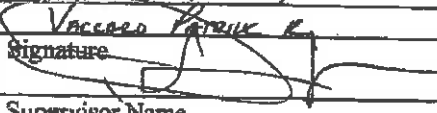
C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) <u>VACCARO PATRICK R.</u>	Badge # <u>353</u>	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature 			Police Officer Assignment <u>Patrick Vaccaro #353 / Patrol</u>		
Supervisor Name <u>SGT BRENDAN CAHILL</u>			Supervisor Signature <u>BC</u>		

U+2015-018
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB10337**

A. Incident Information

Date: 05/23/15	Time: 1932	Day of Week: Saturday	Location: 81 Avenel Blvd Long Branch
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Davis, Michael T.	☒ Yes ☐ No	Obstruction Resisting Arrest	M	B	31	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired 0 No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) MORRELL, EVAN, J	Badge # 838	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☒ Yes ☐ No	Taken to Hospital? ☐ Yes ☒ No
Signature 		Police Officer Assignment Patrol			
Supervisor Name Sgt. Brendan Cahill		Supervisor Signature 			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB10337**

A. Incident Information

Date: 05/23/15	Time: 1932	Day of Week: Saturday	Location: 81 Avenel Blvd Long Branch
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Davis, Michael T.	☒ Yes ☐ No	Obstruction Resisting Arrest	M	B	31	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Murdock, Aaron, Leigh	Badge # 842	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☒ Yes ☐ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>Aaron Murdock</i> 842			Police Officer Assignment Patrol		
Supervisor Name Sgt. Brendan Cahill			Supervisor Signature <i>BC</i>		

UF 2015-018
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB10337

A. Incident Information

Date: 05/23/15	Time: 1932	Day of Week: Saturday	Location: 81 Avenel Blvd Long Branch
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Davis, Michael T.	☒ Yes ☐ No	Obstruction Resisting Arrest	M	B	31	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
BROWN, CHRISTOPHER, J.	833	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature: <i>Christopher Brown</i>		Police Officer Assignment Patrol			
Supervisor Name Sgt. Brendan Cahill		Supervisor Signature <i>BC</i>			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB10440

A. Incident Information

Date: 05/24/2015	Time: 1823	Day of Week: Sunday	Location: Melrose - Ocean
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence
	☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)
	☒ Other Type of Call (Specify) Disorderly	☐ Other Dispute	

(Check only if unusual condition is present.)

(Check only if unusual condition in person exists)

B. Suspect(s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Colon Edgardo	☒ Yes ☐ No	2C:29-2 2C:33-2	M	W	39	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital
resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Hands / Fists ☒ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify:	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
PO Pascucci	348	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature J.D. [Signature]		Police Officer Assignment Avenue Security			
Supervisor Name Sgt. MURPHY 263		Supervisor Signature [Signature] 263			

4F-2015-019
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB10440

A. Incident Information

Date: 05/24/2015	Time: 1823	Day of Week: Sunday	Location: Melrose - Ocean
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence
	☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)
	☒ Other Type of Call (Specify) Disorderly	☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Colon Edgardo	☒ Yes ☐ No	2C:29-2 2C:33-2	M	W	39	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

**[Check yes only for injury/hospital
resulting from police use of force]**

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used:	☒ Compliance Hold	☐ Hands / Fists	Firearms Discharge:	☐ Intentional
	☐ Chemical/Natural Agent	☐ Kicks/Feet		☐ Accidental
	☐ Strike/Use Baton or Other Object	☐ Canine		No. of shots fired _____
	☐ Other Force. Specify:			No. of hits _____ Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<i>P.O. Rodriguez</i>	<i>388</i>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
<i>[Signature]</i>	<i>Avenue Security</i>				
Supervisor Name	Supervisor Signature				
<i>Sgt. Madney 263</i>	<i>[Signature]</i>				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB10440

A. Incident Information

Date: 05/24/2015	Time: 1823	Day of Week: Sunday	Location: Melrose - Ocean
Type of Incident:	☐ Crime in Progress ☐ Suspicious Person ☒ Other Type of Call (Specify) Disorderly	☐ Domestic ☐ Traffic Violation ☐ Other Dispute	Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)
(Check only if unusual condition in person exists)			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Colon Edgardo	☒ Yes ☐ No	2C:29-2 2C:33-2	M	W	39	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital
resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
50 Paulson	1004	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment		
			Beachfront Rover		
Supervisor Name			Supervisor Signature		
Ssgt. Mauney 263			263		

LONG BRANCH POLICE DEPARTMENT

INCIDENT NUMBER: 15LB10440

Date: 05/24/2015	Time: 1823	Day of Week: Sunday	Location: Melrose - Ocean
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence
	☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)
	☒ Other Type of Call (Specify) Disorderly	☐ Other Dispute	

(Check only if unusual condition in person exists)

Suspect (s) Information (only those persons who were subject to police use of force)									
Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?	
Colon Edgardo	☒ Yes ☐ No	2C:29-2 2C:33-2	M	W	39	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No	
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☒ Yes ☐ No	
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:		☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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Name (Last, First, Middle)		Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
SO 0564		1006	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment			
Supervisor Name			Supervisor Signature			
Sgt. Maaney 265			Class 1 Beach Front Rowing.			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB10440

A. Incident Information

Date: 05/24/2015	Time: 1823	Day of Week: Sunday	Location: Melrose - Ocean
Type of Incident: ☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence	
☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)	
☒ Other Type of Call (Specify) Disorderly	☐ Other Dispute		

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Colon Edgardo	☒ Yes	2C:29-2 2C:33-2	M	W	39	☐ Yes	☐ Yes	☐ Yes
	☐ No					☒ No	☒ No	
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	

[Check yes only for injury/hospital
resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
SO Maffey	1030	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
Supervisor Name		Supervisor Signature			
Sgt. Maffey 263		CLASS I Pier Village 263			

UF 2015020
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB10887**

A. Incident Information

Date: 05/29/2015	Time: 2210	Day of Week: FRIDAY	Location: 10CEAN BLVD; OCEAN PLACE RESORT
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify) MISSING PERSON			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
KYRA NEVES	☒ Yes ☐ No	2C:12-1B5,2C:29-1,2C:29-2	F	W	26	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

(Check yes only for injury/hospital resulting from police use of force)

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) STANLEY, Eschwege	Badge # 313	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature 			Police Officer Assignment PATROL		
Supervisor Name SGT ROBERT BELL #329			Supervisor Signature 		

UF 2015-00
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB10887**

A. Incident Information

Date: 05/29/2015	Time: 2210	Day of Week: FRIDAY	Location: 1 OCEAN BLVD; OCEAN PLACE RESORT
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify) ☐ Other Dispute MISSING PERSON			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
KYRA NEVES	☒ Yes ☐ No	2C:12-1B5,2C:29-1,2C:29-2	F	W	26	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

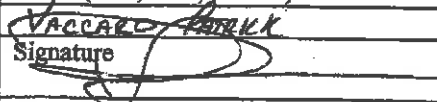
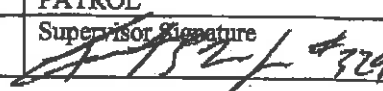
C. Level of Resistance

Suspect:...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Teet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) VACCARO, MARK	Badge # 353	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature 			Police Officer Assignment PATROL		
Supervisor Name SGT ROBERT BELL #329			Supervisor Signature 		

UF2015-620
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB10887

A. Incident Information

Date: 05/29/2015	Time: 2210	Day of Week: FRIDAY	Location: 1 OCEAN BLVD; OCEAN PLACE RESORT
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify) ☐ Other Dispute MISSING PERSON			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
KYRA NEVES	☒ Yes ☐ No	2C:12-1B5, 2C:29-1, 2C:29-2	F	W	26	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
VALDES HEATHER	290	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature 		Police Officer Assignment PATROL			
Supervisor Name SGT ROBERT BELL #329		Supervisor Signature 			

U+2015-020
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB10887**

A. Incident Information

Date: 05/29/2015	Time: 2210	Day of Week: FRIDAY	Location: 1 OCEAN BLVD; OCEAN PLACE RESORT
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person - ☐ Traffic Violation ☒ Other Type of Call (Specify) ☐ Other Dispute MISSING PERSON			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
KYRA NEVES	☒ Yes ☐ No	2C:12-1B5, 2C:29-1, 2C:29-2	F	W	26	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Murdoch, Aaron, Isaiah	Badge # 842	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>Aaron Murdoch</i>			Police Officer Assignment PATROL		
Supervisor Name SGT ROBERT BELL #329			Supervisor Signature <i>[Signature]</i> #329		

U70015-021

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15 LB 11020**

A. Incident Information

Date: 6/1/15	Time: 0120	Day of Week: Monday	Location: NIP 3 TULK
Type of Incident:		Type of Person:	
☐ Crime in Progress ☐ Suspicious Person ☒ Other Type of Call (Specify) Fight		☐ Domestic ☐ Traffic Violation ☐ Other Dispute ☒ Under the Influence ☐ Other Type of Call (Specify)	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
MIMIWIN MANOLO VELAZ	☒ Yes ☐ No	DISORDERLY	M	W	33	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

(Check yes only for injury/hospital resulting from police use of force)

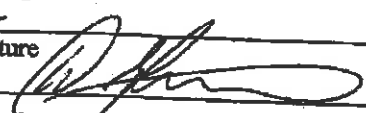
C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☐ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☒ Other Force. Specify: Pushed Away From Fight ☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Po. Pat Joyce	Badge # 926	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature 			Police Officer Assignment Patrol		
Supervisor Name Lt. Doug Gottfredsen			Supervisor Signature 		

U# 2015-022
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15281123

A. Incident Information

Date: <u>05032015</u>	Time: <u>0243</u>	Day of Week: <u>Wednesday</u>	Location: <u>448 Ocean Ave. apt 20A</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic		Type of Person: ☒ Under the Influence	
☒ Suspicious Person		☐ Other Type of Call (Specify)	
☐ Other Type of Call (Specify)		☐ Traffic Violation	
		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Keaveny, Amanda, E	☒ Yes ☐ No	Resisting Disorderly Conduct Aggravated Assault Contempt	~~M~~ F	W	26	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

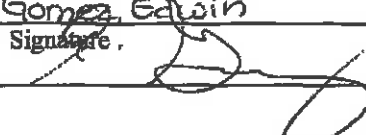
C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] Spat at Police Officer	☒	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Gomez, Edwin	276	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature: 		Police Officer Assignment Patrol			

UF2015-023
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB11232**

A. Incident Information

Date: 06/03/15	Time: 2:47 am	Day of Week: Wednesday	Location: 276 West End Avenue
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Schulz, Daniel	☒ Yes ☐ No	2C:29-1a 2C:29-2a	M	W	31	☐ Yes ☒ No	☒ Yes ☐ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☐ Compliance Hold ☒ Hands / Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify:	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Cahill, Brendan J	318	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature <i>[Signature]</i>		Police Officer Assignment Patrol Road Supervisor			
Supervisor Name Lt. Douglas Gottfredsen		Supervisor Signature <i>[Signature]</i>			

U# 2015-024
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB11594**

A. Incident Information

Date: 06/07/2015	Time: 1928	Day of Week: SUNDAY	Location: 5 UNIVERSITY DR
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☒ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
JUANITA WRZESINSKI	☐ Yes ☒ No		F	W	24	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	B		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		F	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
DANIEL S. RICHARDS	347	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment		
Supervisor Name			Supervisor Signature		
Antonia Gonzalez			[Signature]		

U+2015-24 (2)
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB11594**

A. Incident Information

Date: 06/07/2015	Time: 1928	Day of Week: SUNDAY	Location: 5 UNIVERSITY DR
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☒ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
GLADYS BERY	☒ Yes ☐ No	2C:12-1A	F	B	55	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
JASON FLUDD	☐ Yes ☒ No		M	B	31	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		F	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

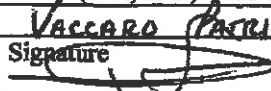
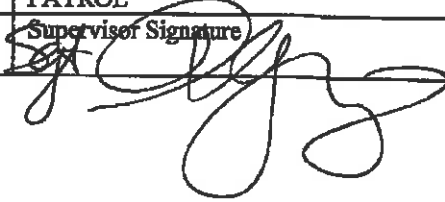
C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☒	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☒ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) VACCARO PATRICK	Badge # 353	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature 		Police Officer Assignment PATROL			
Supervisor Name Sgt Antonio Gonzalez		Supervisor Signature 			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB11601

A. Incident Information

Date: 06/07/15	Time: 20:29	Day of Week: Sunday	Location: 9 Memorial Parkway
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence
	☐ Suspicious Person	☐ Traffic Violation	☐ Other Typc of Call (Specify)
	☒ Other Type of Call (Specify) Disorderly Person	☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Ramirez, Camilo	☒ Yes ☐ No	2C:29-9, 2C:29-2.A, 2C:33-2a	M	W	37	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

**[Check yes only for injury/hospital
resulting from police use of force]**

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Akel, Omar	351	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
		Patrol			
Supervisor Name		Supervisor Signature			
Lt. Dave Gottfredsen #260					

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB12364

A. Incident Information

Date: 06/16/15	Time: 0015	Day of Week: Tuesday	Location: 224 Third Ave. Long Branch
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence
	☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)
	☒ Other Type of Call (Specify) Disorderly Conduct	☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Bowles, William	☒ Yes	Disorderly Conduct Resisting Arrest	M	B	24	☐ Yes	☒ Yes	☒ Yes
	☒ No					☐ No	☐ No	
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	

[Check yes only for injury/hospital
resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☐ Compliance Hold ☐ Hands / Fists		Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
☐ Chemical/Natural Agent ☐ Kicks/Feet		
☐ Strike/Use Baton or Other Object ☐ Canine		
☒ Other Force. Specify: Sweep Take Down		

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Grant, Chris	301	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature Po Cloud #301		Police Officer Assignment Patrol Roving			
Supervisor Name Sgt. Garrett #306		Supervisor Signature Sgt. [Signature] #306			

4F2015-27
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB14451**

A. Incident Information

Date: 07/0715	Time: 0101	Day of Week: Tuesday	Location: Long Branch Ave.
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify) ☐ Other Dispute Field Interview			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Dacres, Dean, Martin	☒ Yes ☐ No	Resisting / Eluding	M	B	30	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒		
...Physical threat/attack on Police Officer			
...Threatened/attacked Police Officer with blunt object			
...Threatened/attacked Police Officer with knife/cutting object			
...Threatened/attacked Police Officer with motor vehicle			
...Threatened Police Officer with firearm			
...Fired at Police Officer			
...Other [Specify]			

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
CHAPARRA, SERGIO A.	362	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment		
			Zone 2		
Supervisor Name			Supervisor Signature		
Sgt. Garrett			Sgt. Brian Lamb # 306		

412015-27
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB14451

A. Incident Information

Date: 07/0715	Time: 0101	Day of Week: Tuesday	Location: Long Branch Ave.
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)
☐ Suspicious Person		☐ Traffic Violation	
☒ Other Type of Call (Specify) Field Interview		☐ Other Dispute	
(Check only if unusual condition in person exists)			

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Dacres, Dean, Martin	☒ Yes ☐ No	Resisting / Eluding	M	B	30	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

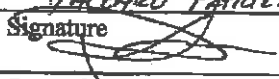
C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
LACARD PATRICK R	353	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No
Signature 		Police Officer Assignment Zone 1			
Supervisor Name Sgt. Garrett		Supervisor Signature  # 306			

UF 2015-27
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB14451

A. Incident Information

Date: 07/0715	Time: 0101	Day of Week: Tuesday	Location: Long Branch Ave.
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☐ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☒ Other Type of Call (Specify) Field Interview		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Dacres, Dean, Martin	☒ Yes ☐ No	Resisting / Eluding	M	B	30	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Gant, Chris	301	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature: Po Gant #301		Police Officer Assignment Roving Patrol			
Supervisor Name Sgt. Garrett		Supervisor Signature Sgt. Brian Gant #306			

4F0015-2.1

INCIDENT NUMBER: 15LB14451

Date: 07/0715	Time: 0101	Day of Week: Tuesday	Location: Long Branch Ave.
Type of Incident:	☐ Crime in Progress ☐ Suspicious Person ☒ Other Type of Call (Specify) Field Interview	☐ Domestic ☐ Traffic Violation ☐ Other Dispute	Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exist.)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Dacres, Dean, Martin	☒ Yes ☐ No	Resisting / Eluding	M	B	30	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:		☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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Name (Last, First, Middle)	Badges #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
STONE, DAVID G	349	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature FD 217 345		Police Officer Assignment Roving Patrol			
Supervisor Name Sgt. Garrett		Supervisor Signature Sgt. Brian Howell			

UF2015-028
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

154314514
INCIDENT NUMBER: _____

A. Incident Information

Date: <u>7/7/15</u>	Time: <u>2053</u>	Day of Week: <u>Tuesday</u>	Location: <u>44 N. Fifth Ave.</u>
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☐ Suspicious Person		☐ Traffic Violation	
☐ Other Type of Call (Specify) <u>Fight</u>		☒ Other Dispute <u>Disorderly</u>	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>Santana, Stephanie</u>	☒ Yes ☐ No	<u>Disorderly fighting</u>	<u>M</u> <u>(F)</u>	<u>W</u>	<u>18</u>	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
<u>Hardy, Cassandra</u>	☒ Yes ☐ No	<u>Disorderly fighting</u>	<u>M</u> <u>(F)</u>	<u>W</u>	<u>23</u>	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☒	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] <u>refused to disperse</u>	☒	☒	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☐ Compliance Hold ☒ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify: _____	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) <u>Gonzalez, Antonia</u>	Badge # <u>270</u>	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <u>[Signature]</u>			Police Officer Assignment <u>Patrol</u>		
Supervisor Name <u>[Signature]</u>			Supervisor Signature _____		

UF0015-029
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB14616

A. Incident Information

Date: 7/9/2015	Time: 0030	Day of Week: Thursday	Location: 1181 Lincol Sq
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☒ Other Type of Call (Specify) Noise Complaint		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect injured?	Hospital?
Margaret Maloney	☒ Yes ☐ No	2C:33-2a, 2c:29-2, 235-1	F	W	19	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) <u>P.O. Joyce #326</u>	Badge # <u>326</u>	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <u>P.O. Joyce #326</u>			Police Officer Assignment PATROL		
Supervisor Name <u>Lt. Douglas Gottfredsen</u>			Supervisor Signature <u>[Signature]</u> 260		

UT 2015-030
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB142

A. Incident Information

Date: <u>7-11-15</u>	Time: <u>9:130</u>	Day of Week: <u>SATURDAY</u>	Location: <u>MURKIN / OCEAN</u>
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☒ Other Type of Call (Specify) <u>DISORDERLY PERSON</u>		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>WALTER OMAR CAMERON</u>	☒ Yes ☐ No	<u>DISORDERLY, RESISTANCE</u>	<u>M</u>	<u>W</u>	<u>31</u>	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

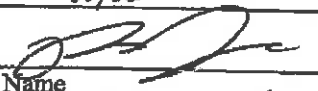
C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☒ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) <u>P.O. Patrick Joyce</u>	Badge # <u>326</u>	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature 			Police Officer Assignment <u>Patrol</u>		
Supervisor Name <u>LT. JORGE SILVERIO</u>			Supervisor Signature 		

UF 2015-031
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB15167**

A. Incident Information

Date: 07/14/15	Time: 1100	Day of Week: TUESDAY	Location: 56 MYRTLE AVE #8
Type of Incident: ☐ Crime in Progress		☒ Domestic	Type of Person: ☐ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☐ Other Type of Call (Specify)		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
NEWMAN, ALLEN 2ND	☒ Yes ☐ No	2C:12-1A, 2C:29-1, 2C:29-2, 2C:17-3	M	B	26	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

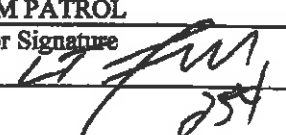
C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] UNRULY	☒	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearm Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
EVANGELHO, JOHN	274	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature 		Police Officer Assignment UNIFORM PATROL			
Supervisor Name LT. FRANK MOREY		Supervisor Signature 			

U+ 2015-033
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB16269**

A. Incident Information

Date: 7/24/2015	Time: 2049	Day of Week: Friday	Location: Morris Ave/Prospect St
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☒ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☐ Under the Influence ☒ Other Type of Call (Specify) Traffic Violation

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
	☒ Yes ☐ No	2C:29-2B 39:3-4 39:3-10 39-6B-2	M	W	15	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☐	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] Eluded Law Enforcement Officers	☒	☐	☐

D. Type of Force Used (check all that apply)

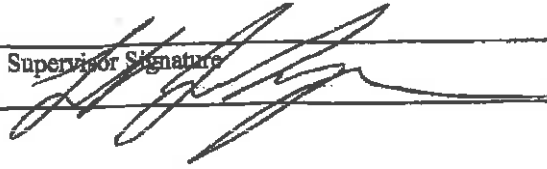
Type of Force Used: ☐ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Romano Nick	Badge # 312	On-Duty? ☒ Yes ☐ No	Uniform? ☐ Yes ☒ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>Nick Romano</i>			Police Officer Assignment Detective Long Branch Street Crimes Unit		

Supervisor Name
Lieutenant Detective Grialdi

Supervisor Signature

A handwritten signature in black ink, appearing to be 'J. Grialdi', written over the signature line.

UF2015-034
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 1516164

A. Incident Information

Date: 7/26/15	Time: 0258	Day of Week: Sunday	Location: 73 Cedar Ave 2B
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☒ Other Dispute			Type of Person: ☐ Under the Influence ☒ Other Type of Call (Specify) Disorderly

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Johnson Christopher	☒ Yes ☐ No	2C:33-2A1 2C:29-2	(M)	(W)	24	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Rodriguez, Marco	322	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
[Signature]		Patrol / Zone 4			
Supervisor Name		Supervisor Signature			
LT. JORGE SILVERIO		[Signature] 295			

UT 2015-034
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 151014413

A. Incident Information

Date: 7/26/15	Time: 0258	Day of Week: Sunday	Location: 73 Cedar Ave LB
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☐ Under the Influence
☐ Suspicious Person	☐ Traffic Violation	☒ Other Type of Call (Specify) Disorderly	
☐ Other Type of Call (Specify)	☒ Other Dispute		

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Johnson Christopher	☒ Yes ☐ No	2C:33-2A1 2C:29-2	M	W	24	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Callahan, Brendan	318	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature: [Signature]			Police Officer Assignment: Road Supervisor		
Supervisor Name: LT. JORGE SILVERIO			Supervisor Signature: [Signature] 225		

UF 2015-035
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

A. Incident Information

INCIDENT NUMBER: 15LBR

Date: <u>8/1/15</u>	Time: <u>0643</u>	Day of Week: <u>SAT</u>	Location: <u>555 Patten Ave.</u>
Type of Incident: ☒ Crime in Progress ☐ Suspicious Person ☐ Other Type of Call (Specify)			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)
☐ Domestic ☐ Traffic Violation ☐ Other Dispute			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Buzzetta-Caputo, Natalie	☒ Yes ☐ No	20-29-1, 12-16, 18-2 29-2, 29-3, 39-4 20-3, 29-1	M	W	22	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

(Check yes only for injury/hospital resulting from police use of force)

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) <u>Vecchione, Gary</u>	Badge # <u>343</u>	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <u>[Signature]</u>			Police Officer Assignment <u>Patrol</u>		
Supervisor Name			Supervisor Signature		

UF 2015-036
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 152B176

A. Incident Information

Date: <u>8/6/15</u>	Time: <u>1548</u>	Day of Week: <u>THURSDAY</u>	Location: <u>6 ELLIS AVE</u>
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☐ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☒ Other Type of Call (Specify) <u>FOOT PURSUIT</u>		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
JACKSON, JOSCEL D	☒ Yes ☐ No	2C:29-1 2C:29-2	M	B	20	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☒ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
VACCARO, PATRICK RYAN	353	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment		
Supervisor Name			Supervisor Signature		
SGT. CHRISTOPHER HAZEL			SGT. [Signature] #291		

452015-036
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 152B17

A. Incident Information

Date: <u>8/6/15</u>	Time: <u>1548</u>	Day of Week: <u>Thursday</u>	Location: <u>6 ELLIS AVE</u>
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☐ Suspicious Person		☐ Traffic Violation	
☒ Other Type of Call (Specify) <u>FOOT PURSUIT</u>		☐ Other Dispute	
Type of Person: ☐ Under the Influence			
☐ Other Type of Call (Specify)			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>JACKSON, JASCEL D</u>	☒ Yes	<u>2C:29-1</u>	<u>M</u>	<u>B</u>	<u>20</u>	☐ Yes	☐ Yes	☐ Yes
	☐ No	<u>2C:29-2</u>				☒ No	☒ No	☒ No
	☐ Yes		<u>M</u>	<u>W</u>		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No
	☐ Yes		<u>M</u>	<u>W</u>		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>RICHARDS, DANIEL</u>	<u>349</u>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature <u>[Signature]</u>			Police Officer Assignment <u>PATROL</u>		
Supervisor Name <u>SGT. CHRISTOPHER HAZEL</u>			Supervisor Signature <u>[Signature]</u> #291		

UF2015-037
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

A. Incident Information

INCIDENT NUMBER: 15LB17698

Date: 08/07/2015		Time: 1459		Day of Week: Friday		Location: 79 Morrell St	
Type of Incident: ☒ Crime in Progress		☐ Domestic		Type of Person: ☐ Under the Influence			
☐ Suspicious Person		☐ Traffic Violation		☐ Other Type of Call (Specify)			
☐ Other Type of Call (Specify)		☐ Other Dispute					

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
COFER, Brian	☒ Yes ☐ No	Eluding	M	B	35	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

(Check yes only for injury/hospital resulting from police use of force)

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☒	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold		☐ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental	
☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired ____	
☐ Other Force. Specify:		No. of hits ____ Use 'UNK' if unknown	

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Bataille Robert R	311	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
Supervisor Name		Zone 2			
		Supervisor Signature			

UF2015-037
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB17698**

A. Incident Information

Date: 08/07/2015	Time: 1500	Day of Week: FRIDAY	Location: 73 MORELL ST
Type of Incident: ☒ Crime in Progress ☐ Domestic			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)
☐ Suspicious Person ☐ Traffic Violation			
☒ Other Type of Call (Specify) VEHICLE PURSUIT			
(Check only if unusual condition in person exists)			

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
BRIAN COFER	☒ Yes ☐ No	ELUDING POLICE OFFICER	M	B	35	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☒	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☒ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☒ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
VACCARO, PATRICK R	353	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment PATROL		
Supervisor Name LT CARL R. SPANCO #258			Supervisor Signature #258		

UF2015-037
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB11601 152817698

A. Incident Information

Date: 08/07/15	Time: 15:24	Day of Week: Friday	Location: Bath Ave/ Morrell St
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☐ Under the Influence
	☐ Suspicious Person	☐ Traffic Violation	☒ Other Type of Call (Specify) Pursuit
	☒ Other Type of Call (Specify) Pursuit	☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
COFER, BRIAN	☒ Yes	2C:29-9, 39:3-96	M	B	35	☐ Yes	☒ Yes	☒ Yes
	☐ No					☒ No	☐ No	
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	

**[Check yes only for injury/hospital
resulting from police use of force]**

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☒ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☒ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Akd, Omar	351	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
<i>[Signature]</i> #351		Patrol			
Supervisor Name		Supervisor Signature			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB17698

A. Incident Information

Date: 08/07/2015	Time: 1459	Day of Week: Friday	Location: 79 Morrell St
Type of Incident: ☒ Crime in Progress		☐ Domestic	Type of Person: ☐ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☐ Other Type of Call (Specify)		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
COFER, Brian	☒ Yes ☐ No	Eluding	M	B	35	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☒	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold	☐ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental
☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired ____
☐ Other Force. Specify:		No. of hits ____
		Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Bataille Robert B	311	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☒ No
Signature	Police Officer Assignment Zone 2				
Supervisor Name	Supervisor Signature				

08-2015-007

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB17925**

A. Incident Information

Date: 8/10/15	Time: 1739	Day of Week: SUNDAY	Location: AVENUE BEACH CLUB
Type of Incident: ☐ Crime in Progress ☐ Domestic		Type of Person: ☒ Under the Influence	
☐ Suspicious Person ☐ Traffic Violation		☐ Other Type of Call (Specify)	
☒ Other Type of Call (Specify) FIGHT		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
JUAN BORBON	☒ Yes ☐ No	DISORDERLY CONDUCT	M	W	24	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] COMBATIVE	☒	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☐ Compliance Hold ☐ Hands / Fists ☒ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify:	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
EVANGELHO, JOHN	274	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment		
			OT SECURITY DETAIL AT AVENUE BEACH PARTY		
Supervisor Name LT. CRAIG R. SPENCER #253			Supervisor Signature #253		

U#2015-040
LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 93182

A. Incident Information

Date: <u>08/13/2015</u>	Time: <u>1748</u>	Day of Week: <u>Thursday</u>	Location: <u>269 Second Ave</u>
Type of Incident: ☐ Crime in Progress		☒ Domestic	
☐ Suspicious Person		☐ Traffic Violation	
☐ Other Type of Call (Specify)		☐ Other Dispute	
Type of Person: ☐ Under the Influence		☐ Other Type of Call (Specify)	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>Aroya-Guerrero, JSE</u>	☒ Yes ☐ No	<u>2C12-1a</u>	<u>M</u>	<u>W</u>	<u>22</u>	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify: <u>Tasked Subject in Foot Pursuit</u>	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>Morrison Michael</u>	<u>321</u>	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No
Signature			Police Officer Assignment		
<u>[Signature]</u>			<u>Patrol</u>		
Supervisor Name			Supervisor Signature		

44-2015-043

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB20923**

A. Incident Information

Date: 09/07/2015	Time: 1700	Day of Week: Monday	Location: Pier Village
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☐ Suspicious Person		☐ Traffic Violation	
☒ Other Type of Call (Specify) resisting		☒ Other Dispute	
Type of Person: ☒ Under the Influence			
☐ Other Type of Call (Specify)			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Alantara, Chanel	☒ Yes ☐ No	resisting,	F	B	27	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
Ellis, Timothy	☒ Yes ☐ No	resisting	M	B	34	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Roselli, Vincent	Badge # 250	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>Vincent Roselli</i>			Police Officer Assignment Outside Overtime (Avenue)		
Supervisor Name			Supervisor Signature		

U+2015-044

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB25

A. Incident Information

Date: <u>09-19-2015</u>	Time: <u>1509</u>	Day of Week: <u>Saturday</u>	Location: <u>Headquarters - LBPD</u>
Type of Incident: ☐ Crime in Progress		☒ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☐ Other Type of Call (Specify)		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>Haffman, George</u>	☒ Yes ☐ No	<u>2C-12-3</u>	<u>M</u>	<u>W</u>	<u>52</u>	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) <u>BEN CRUZ</u>	Badge # <u>320</u>	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <u>[Signature]</u> #320 LBPD			Police Officer Assignment <u>PATROL</u>		
Supervisor Name <u>Sgt Robert Shamrock</u>			Supervisor Signature <u>[Signature]</u> #245		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

A. Incident Information

Date: 9/24/15 Time: 0114 Day of Week: Thursday INCIDENT NUMBER: Y6157

Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) Disorderly ☐ Other Dispute

Location: 16 Lakeside Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
JOANN MADDAD	☒ Yes ☐ No	26:24-1 26:24-2	~~M~~ F	(W)	67	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☒ Hands / Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify:

Firearms Discharge: ☐ Intentional ☐ Accidental

No. of shots fired _____

No. of hits _____

Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle) JOHN D. ADAMS Badge # 349 On-Duty? ☒ Yes ☐ No Uniform? ☒ Yes ☐ No Officer Injured ☐ Yes ☒ No Taken to Hospital? ☐ Yes ☒ No

Signature [Signature] Police Officer Assignment Patrol Supervisor Name [Signature] Supervisor Signature [Signature]

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 1515755

A. Incident Information

Date: <u>9/24/15</u>	Time: <u>0119</u>	Day of Week: <u>THURSDAY</u>	Location: <u>16 Laredo St.</u>
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☐ Suspicious Person		☐ Traffic Violation	
<u>DISORDERLY</u> ☒ Other Type of Call (Specify)		☐ Other Dispute	
Type of Person: ☒ Under the Influence			
☐ Other Type of Call (Specify)			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>HADDAD SAMIR</u>	☒ Yes ☐ No	<u>26:29-1</u> <u>26:29-2</u>	<u>M</u>	<u>W</u>	<u>52</u>	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>Thorne, Michael W.</u>	<u>843</u>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature <u>Michael Thorne #843</u>			Police Officer Assignment <u>Beach Front Ave.</u>		
Supervisor Name			Supervisor Signature <u>[Signature]</u> <u>260</u>		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

A. Incident Information

INCIDENT NUMBER: 154775

Date: <u>9/24/15</u>	Time: <u>0114</u>	Day of Week: <u>Thursday</u>	Location: <u>16 L. Road St.</u>
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☐ Suspicious Person		☐ Traffic Violation	
<u>Disorderly</u> ☒ Other Type of Call (Specify)		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
HADDAD SAMIR	☒ Yes	<u>26:29-1</u>	☒ M	<u>W</u>	<u>52</u>	☐ Yes	☐ Yes	☐ Yes
	☐ No	<u>26:29-2</u>	<u>E</u>	<u>W</u>		☒ No	☒ No	☒ No
	☐ Yes		<u>M</u>	<u>W</u>		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No
	☐ Yes		<u>M</u>	<u>W</u>		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>Thorne, Michael W.</u>	<u>843</u>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature <u>Michael Thorne #843</u>			Police Officer Assignment <u>Beach Front Ave.</u>		
Supervisor Name			Supervisor Signature <u>[Signature]</u> <u>260</u>		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 156724

A. Incident Information

Date: <u>9/24/16</u>	Time: <u>0114</u>	Day of Week: <u>Thursday</u>	Location: <u>161 ALCO ST</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic		Type of Person: ☒ Under the Influence	
☐ Suspicious Person ☐ Traffic Violation		☐ Other Type of Call (Specify)	
<u>DISORDERLY</u> ☒ Other Type of Call (Specify)		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>JOHN HARRIS</u>	☒ Yes ☐ No	<u>2C:29-1</u> <u>2C:29-2</u>	<u>M</u>	<u>W</u>	<u>52</u>	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold	☒ Hands / Fists	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
☐ Chemical/Natural Agent	☐ Kicks/Feet	
☐ Strike/Use Baton or Other Object	☐ Canine	
☐ Other Force. Specify:		

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>THOMAS DANIEL J</u>	<u>347</u>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature <u>[Signature]</u>	Police Officer Assignment <u>PAIRO</u>				
Supervisor Name	Supervisor Signature <u>[Signature]</u> <u>260</u>				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB23104**

A. Incident Information

Date: 09/29/2015	Time: 1637	Day of Week: TUESDAY	Location: 205 Union Avenue
Type of Incident: ☐ Crime in Progress ☐ Domestic		Type of Person: ☐ Under the Influence	
☐ Suspicious Person ☐ Traffic Violation		☒ Other Type of Call (Specify) Shoplifting call	
☒ Other Type of Call (Specify) Shoplifting call		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Lajara, Robert	☒ Yes ☐ No	Obstruction, Resisting arrest, Shoplifting	M	W	31	☐ Yes ☒ No	☒ Yes ☐ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒		
...Physical threat/attack on Police Officer			
...Threatened/attacked Police Officer with blunt object			
...Threatened/attacked Police Officer with knife/cutting object			
...Threatened/attacked Police Officer with motor vehicle			
...Threatened Police Officer with firearm			
...Fired at Police Officer			
...Other [Specify] flight	☒		

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown.
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E. Officer Information

Name (Last, First, Middle) BEIRNE, JAMES	Badge # 354	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☒ Yes ☐ No
Signature <i>[Signature]</i>			Police Officer Assignment PATROL		
Supervisor Name Lt. Doug Gottfredsen			Supervisor Signature <i>[Signature]</i> 240		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **151b23054**

A. Incident Information

Date: 09/29/2015		Time: 0903		Day of Week: Tuesday		Location: Broadway/Dudley	
Type of Incident: ☐ Crime in Progress ☐ Domestic				Type of Person: ☐ Under the Influence			
☐ Suspicious Person ☒ Traffic Violation				☐ Other Type of Call (Specify) _____			
☐ Other Type of Call (Specify) _____				☐ Other Dispute			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Louis Zasadowski	☒ Yes ☐ No	2C:35-10(1) 2C:36-2 2C:28-6.1A	M	W	34	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

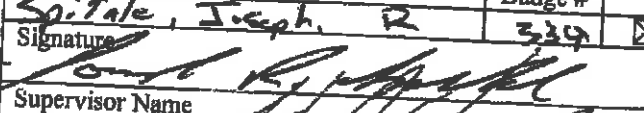
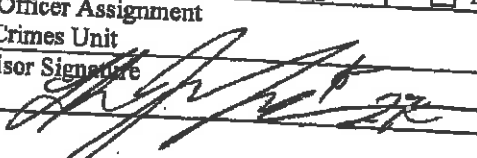
C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] _____	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold		☐ Hands / Fists	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
☐ Chemical/Natural Agent	☐ Kicks/Feet		
☐ Strike/Use Baton or Other Object	☐ Canine		
☐ Other Force. Specify: _____			

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Spitale, Joseph R	334	☒ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature: 		Police Officer Assignment Street Crimes Unit			
Supervisor Name Detective Lieutenant Grippaldi		Supervisor Signature: 			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB23386**

A. Incident Information

Date: 10/02/2015	Time: 1343 hrs	Day of Week: Friday	Location: 61 Lippincott Avenue, Apt 1
Type of Incident: ☒ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)
Search Warrant			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Pierce III, John	☒ Yes ☐ No	2C:35-10A(1), 2C:35-10A(1), 2C:35-5B(2), 2C:35-7, 2C:35-7.1A 2C:36-6, 2C:36-2	M	W	25	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☐	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] Non-compliance to Officer Commands	☒	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☐ Compliance Hold ☒ Hands / Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify:	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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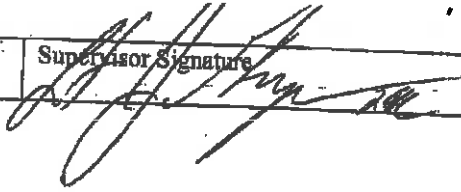
E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Marshall Brown	319	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
		Detective			

Supervisor Name

Detective Lieutenant Grippaldi

Supervisor Signature



LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15B23480

A. Incident Information

Date: <u>10/3/15</u>	Time:	Day of Week:	Location:
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify) <u>Domestic</u>	☐ Other Type of Call (Specify)
☒ Other Type of Call (Specify) <u>Domestic</u>	☐ Other Dispute		

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>Cantavero, Jodi</u>	☒ Yes	<u>Harassment</u>	<u>M</u>	<u>W</u>	<u>32</u>	☒ Yes	☒ Yes	☒ Yes
	☐ No	<u>DVA</u>				☐ No	☒ No	☐ No
	☐ Yes		<u>M</u>	<u>W</u>		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No
	☐ Yes		<u>M</u>	<u>W</u>		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No

(Check yes only for injury/hospital resulting from police use of force)

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒		
...Physical threat/attack on Police Officer	☒		
...Threatened/attacked Police Officer with blunt object	☐		
...Threatened/attacked Police Officer with knife/cutting object	☒		
...Threatened/attacked Police Officer with motor vehicle	☐		
...Threatened Police Officer with firearm	☐		
...Fired at Police Officer	☐		
...Other [Specify]			

D. Type of Forces Used (check all that apply)

Type of Force Used:	☒ Compliance Hold	☒ Hands / Fists	Firearms Discharge:	☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Canine	☐ Accidental	
☐ Strike/Use Baton or Other Object			No. of shots fired	___
☐ Other Force. Specify:			No. of hits	___
			Use 'UNK' if unknown	

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>Gonzalez, Antonio</u>	<u>210</u>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
Supervisor Name	Supervisor Signature				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB23480**

A. Incident Information

Date: 10-3-15	Time: 2012	Day of Week: Saturday	Location: 10 Thrid Ave
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) _____ ☐ Other Dispute			Type of Person: ☒ Under the Influence ☒ Other Type of Call (Specify) Domestic

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Joel Cantarero	☒ Yes ☐ No	Resisting Arrest Simple Assault Criminal Mischief	M	H	22	☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify: _____	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Officer: George Thomas	336	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
Supervisor Name		Patrol			
Sgt Shamrock #245		Supervisor Signature			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB23480**

A. Incident Information

Date: 10-3-15	Time: 2012	Day of Week: Saturday	Location: 10 Thrid Ave
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☒ Under the Influence ☒ Other Type of Call (Specify) - Domestic

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Joel Cantarero	☒ Yes ☐ No	Resisting Arrest Simple Assault Criminal Mischief	M	H	22	☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Page Danna Lynn	355	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment		
[Signature]			Patrol		
Supervisor Name			Supervisor Signature		
Sgt Shamrock #245					

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB24164**

A. Incident Information

Date: 10/11/2015	Time: 0114	Day of Week: SUNDAY	Location: 73 SECOND AVE
Type of Incident: ☐ Crime in Progress ☐ Domestic		Type of Person: ☐ Under the Influence	
☐ Suspicious Person ☐ Traffic Violation		☐ Other Type of Call (Specify)	
☒ Other Type of Call (Specify) FIGHT CALL		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
CRUZ-SANCHEZ, MARGARITA A.	☒ Yes ☐ No	RESISTING, HINDERING APP OF ANOTHER	F	H	37	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold	☐ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental
☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired ____
☐ Other Force. Specify:		No. of hits ____
		Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
SAMOL, George Luis	330	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
Supervisor Name		Supervisor Signature			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

15LB24407
INCIDENT NUMBER: _____

A. Incident Information

Date: 10/13/15	Time: 1836	Day of Week: Tuesday	Location: 579 High St. #2
Type of Incident: ☒ Crime in Progress	☐ Domestic	Type of Person: ☐ Under the Influence	
☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)	
☐ Other Type of Call (Specify)	☐ Other Dispute		

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Arthur Williams	☒ Yes ☐ No	hindering, poss. weapon Mauling poss. weapon	M	B	29	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☐	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] reached for a gun	☒	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold	☐ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental
☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired 0
☒ Other Force. Specify: grabbed Suspect's throat		No. of hits _____ Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On Duty?	Uniform?	Officer Injured	Taken to Hospital?
P.O. Gary Vecchione	343	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
Supervisor Name	Supervisor Signature				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB25411**

A. Incident Information

Date: 10/24/2015	Time: 0046hrs	Day of Week: Saturday	Location: 425 Liberty Street
Type of Incident: ☐ Crime in Progress ☐ Domestic		Type of Person: ☒ Under the Influence	
☐ Suspicious Person ☐ Traffic Violation		☐ Other Type of Call (Specify)	
☒ Other Type of Call (Specify) fight		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Mariah K Labriola	☒ Yes ☐ No	Simple assault & Resisting arrest	F	B	24	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☐ Compliance Hold ☐ Hands / Fists ☒ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify:	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
--	---

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
	295	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature SILVERIO, JORGE M		Police Officer Assignment Watch Commander / Shift supervisor			
Supervisor Name Lt. Gotfredsen		Supervisor Signature 			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB25411**

A. Incident Information

Date: 10/24/2015	Time: 0046hrs	Day of Week: Saturday	Location: 425 Liberty Street
Type of Incident: ☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence	☐ Other Type of Call (Specify)
☐ Suspicious Person	☐ Traffic Violation		
☒ Other Type of Call (Specify) fight		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Mariah K Labriola	☒ Yes ☐ No	Simple assault & Resisting arrest	F	B	24	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold	☒ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental
☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired ___
☐ Other Force. Specify:		No. of hits ___
		Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Rodriguez, Marco	322	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
	Watch Commander / Shift supervisor				
Supervisor Name	Supervisor Signature				
Lt. Gottfredsen					

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
		☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment Watch Commander / Shift supervisor			
Supervisor Name Lt. Gottfredsen		Supervisor Signature 			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB25411**

A. Incident Information

Date: 10/24/2015	Time: 0046hrs	Day of Week: Saturday	Location: 425 Liberty Street
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify) fight			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Mariah K Labriola	☒ Yes ☐ No	Simple assault & Resisting arrest	F	B	24	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Pists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Pagc, Dana Lynn	Badge # 355	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>[Signature]</i>			Police Officer Assignment Watch Commander / Shift supervisor		
Supervisor Name Lt. Gotfredsen			Supervisor Signature <i>[Signature]</i>		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB25

A. Incident Information

Date: <u>10/24/15</u>	Time: <u>0106</u>	Day of Week: <u>SATURDAY</u>	Location: <u>425 LIBERTY ST.</u>
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☒ Other Type of Call (Specify) <u>BAR FIGHT</u>		☒ Other Dispute	<u>BAR FIGHT</u>

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>WILLIS, NICOLE</u>	☒ Yes ☐ No	<u>DISORDERLY & RESISTING</u>	<u>M</u>	<u>W</u>	<u>27</u>	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) <u>EVANGELINO, TORAN</u>	Badge # <u>274</u>	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <u>[Signature]</u>			Police Officer Assignment <u>PATROL</u>		
Supervisor Name <u>LT. GOTTFREDSEN #260</u>			Supervisor Signature <u>[Signature]</u>		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB25477**

A. Incident Information

Date: 10/24/2015	Time: 2218	Day of Week: Saturday	Location: Second Avenue/Broadway
Type of Incident: ☒ Crime in Progress		☐ Domestic	Type of Person: ☐ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☒ Other Type of Call (Specify) On view narcotics transaction
☐ Other Type of Call (Specify)		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Leon, Joseph, J	☒ Yes ☐ No	2C:28-6 2C:35-10(A)1 2C:29-2	M	W	31	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits <u>0</u> Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Spitale, Joseph, R	Badge # 339	On-Duty? ☒ Yes ☐ No	Uniform? ☐ Yes ☒ No	Officer Injured ☒ Yes ☐ No	Taken to Hospital? ☐ Yes ☒ No
Signature 			Police Officer Assignment Street Crimes Unit Detective		
Supervisor Name Lieutenant Gotfredsen			Supervisor Signature 		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB25477**

A. Incident Information

Date: 10/24/2015	Time: 2218	Day of Week: Saturday	Location: Second Avenue/Broadway
Type of Incident: ☒ Crime in Progress		☐ Domestic	
☐ Suspicious Person		☐ Traffic Violation	
☐ Other Type of Call (Specify)		☒ Other Type of Call (Specify) On view narcotics transaction	
☐ Other Dispute			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Leon, Joseph, J	☒ Yes ☐ No	2C:28-6 2C:35-10(A)1 2C:29-2	M	W	31	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired 0 No. of hits 0 Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Romano, Nikk, J.	342	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature <i>Nikk Romano</i> 342			Police Officer Assignment Street Crimes Unit Detective		
Supervisor Name Lieutenant Gotfredson			Supervisor Signature 		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB11601**

A. Incident Information

Date: 10/18/15	Time: 20:15	Day of Week: Sunday	Location: 302 Willow Avenue, Apt AA, Long Branch, NJ, 07740
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☐ Other Dispute			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Olea-Reyez, Juan	☒ Yes ☐ No	2C:12-1A & 2C:29-2A(1)	M	B	32	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Akel, Omar	Badge # 351	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>[Signature]</i>			Police Officer Assignment Patrol		
Supervisor Name			Supervisor Signature		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB26646**

A. Incident Information

Date: 11/07/2015	Time: 1339	Day of Week: Saturday	Location: Jerry Morgan Park
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☐ Suspicious Person		☒ Traffic Violation	
☒ Other Type of Call (Specify) Foot Pursuit		☐ Other Dispute	
		Type of Person: ☐ Under the Influence	
		☐ Other Type of Call (Specify)	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Wilson, Saquan	☒ Yes ☐ No	2C:39-5B	M	B	21	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☒	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired 0 No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
VACCARO PATRICK	353	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
		Patrol			
Supervisor Name		Supervisor Signature			
LT. FRANK MOREY #25V		LT. J. 254			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB27119

A. Incident Information

Date: 11/13/15	Time: 0136	Day of Week: FRIDAY	Location: NEW CT. (STINGER'S BAR)
Type of Incident: ☐ Crime in Progress ☐ Domestic		Type of Person: ☒ Under the Influence	
☐ Suspicious Person ☐ Traffic Violation		☒ Other Type of Call (Specify) HAD BEEN DRINKING	
☒ Other Type of Call (Specify) BAR FIGHT		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
ANGEL SANTIAGO	☒ Yes ☐ No	DISORDERLY CONDUCT	M	B	25	☐ Yes ☒ No	☒ Yes ☐ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] FLIGHT w/ OTHER RILE	☒	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Hands / Fists ☒ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify:	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
EVANGELHO, JOHN	274	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature <i>[Signature]</i>			Police Officer Assignment PATROL (IN UNIFORM)		
Supervisor Name Sgt. Brendan Cahill			Supervisor Signature <i>[Signature]</i> 315		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB27260**

A. Incident Information

Date: 11/14/2015	Time: 2240	Day of Week: Saturday	Location: 344 Broadway
Type of Incident: ☒ Crime in Progress		☐ Domestic	
☐ Suspicious Person		☐ Traffic Violation	
☐ Other Type of Call (Specify)		☐ Other Dispute	
		Type of Person: ☐ Under the Influence	
		☒ Other Type of Call (Specify) Under arrest	

(Check only if unusual condition in person exists).

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Yahya Kamu	☒ Yes ☐ No	2C:29-9 2C:35-10A(1) 2C:29-2 2C:2C:28-6	M	B	55	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits <u>UNK</u> Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) Pascucci, Jake B.	Badge # 348	On-Duty? ☒ Yes ☐ No	Uniform? ☐ Yes ☒ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>[Signature]</i>		Police Officer Assignment Patrolman Pascucci Street Crimes Unit			
Supervisor Name Detective Lieutenant Grippaldi		Supervisor Signature <i>[Signature]</i>			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB27480**

A. Incident Information

Date: 11/17/2015	Time: 1525	Day of Week: TUESDAY	Location: 300 SECOND AVE
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☒ Other Type of Call (Specify) CHECK WELL-BEING/CRIS		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
	☐ Yes ☒ No		F	W	51	☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

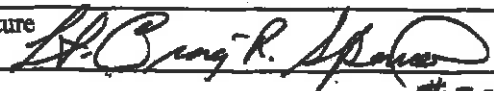
C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify: _____	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
CHAPALLO, SERGIO A.	352	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☒ Yes ☐ No
Signature 		Police Officer Assignment PATROL			
Supervisor Name LT. CRAIG R. SPENCER #258		Supervisor Signature  #258			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB27673**

A. Incident Information

Date: 11/19/2015	Time: 1532	Day of Week: Thursday	Location: 251 Broadway
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☒ Suspicious Person		☐ Traffic Violation	
☐ Other Type of Call (Specify)		☐ Other Dispute	
		Type of Person: ☒ Under the Influence	
		☐ Other Type of Call (Specify)	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Rodriguez-Bautista, Javier	☒ Yes ☐ No	2C:33-2 2C:29-2.A	M	W	37	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
---	--

E. Officer Information

Name (Last, First, Middle) <i>Olivera, Brian</i>	Badge # <i>344</i>	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <i>[Signature]</i> #344		Police Officer Assignment Patrol			
Supervisor Name <i>Sgt Shamrock M #245</i>		Supervisor Signature <i>[Signature]</i>			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB27673**

A. Incident Information

Date: 11/19/2015	Time: 1532	Day of Week: Thursday	Location: 251 Broadway
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☒ Suspicious Person		☐ Traffic Violation	
☐ Other Type of Call (Specify)		☐ Other Dispute	
Type of Person: ☒ Under the Influence			☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Rodriguez-Bautista, Javier	☒ Yes ☐ No	2C:33-2 2C:29-2.A	M	W	37	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
WAGNER JOSHUA J.	323	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature: <i>[Signature]</i>		Police Officer Assignment: Patrol			
Supervisor Name: Sgt Shamrock #245		Supervisor Signature: <i>[Signature]</i>			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB27673**

A. Incident Information

Date: 11/19/2015	Time: 1532	Day of Week: Thursday	Location: 251 Broadway
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☒ Suspicious Person		☐ Traffic Violation	
☐ Other Type of Call (Specify)		☐ Other Dispute	
		Type of Person: ☒ Under the Influence	
		☐ Other Type of Call (Specify)	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Rodriguez-Bautista, Javier	☒ Yes	2C:33-2	M	W	37	☐ Yes	☐ Yes	☐ Yes
	☐ No	2C:29-2.A				☒ No	☒ No	☒ No
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No
	☐ Yes		M	W		☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
CHAPARRO, SERGIO	352	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature: 		Police Officer Assignment: Patrol			
Supervisor Name: Sgt Shamkuk #245		Supervisor Signature: 			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

15LB28

INCIDENT NUMBER: _____

A. Incident Information

Date: <u>11-24-15</u>	Time: <u>1505</u>	Day of Week: <u>Tuesday</u>	Location: _____
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify) _____
☒ Other Type of Call (Specify) <u>Intoxicated Subject</u>		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
	☒ Yes ☐ No	<u>Resisting Arrest False info to Police Disarming a LEO</u>	M	W	30	☐ Yes ☒ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No	<u>obstruction contempt</u>	M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] _____	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify: _____	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle) <u>Widdis, Tracy L</u>	Badge # <u>310</u>	On-Duty? ☒ Yes ☐ No	Uniform? ☒ Yes ☐ No	Officer Injured ☐ Yes ☒ No	Taken to Hospital? ☐ Yes ☒ No
Signature <u>[Signature]</u>			Police Officer Assignment <u>Patrol</u>		
Supervisor Name <u>[Signature]</u>			Supervisor Signature _____		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: _____

15LB28081

A. Incident Information

Date: 11/24/15	Time: 5:05	Day of Week: TUESDAY	Location: 73 Cedar Ave; REAR
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)	
☒ Other Type of Call (Specify)		☐ Other Dispute	
INTOXICATED SUBJECT			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
	☒ Yes	2C:29-1 OBSTRUCT	M	W	30	☐ Yes	☐ Yes	☐ Yes
	☐ No	2C:29-2 RESISTING				☒ No	☒ No	☒ No
	☐ Yes	2C:12-11A DISARMED	M	W		☐ Yes	☐ Yes	☐ Yes
	☐ No	2C:29-3A false info				☐ No	☐ No	☐ No
	☐ Yes	2C:29-4 LEO	M	W		☐ Yes	☐ Yes	☐ Yes
	☐ No	218-7A drinking public				☐ No	☐ No	☐ No
		218-7C open container						

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used:	☒ Compliance Hold	☒ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental	
☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired _____	
☐ Other Force. Specify:		No. of hits _____	
		Use 'UNK' if unknown	

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
LEAVY, KIMBERLY, A.	308	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
P.O. Kimberly Leavy #308	PATROL				
Supervisor Name	Supervisor Signature				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

15LB2808

INCIDENT NUMBER: _____

A. Incident Information

Date: <u>11-24-15</u>	Time: <u>1505</u>	Day of Week: <u>Tuesday</u>	Location: <u>73 Cedar Ave Rear</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify) <u>Intoxicated Subject</u> ☐ Other Dispute			Type of Person: ☒ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
	☒ Yes ☐ No	<u>Resisting arrest</u> <u>False info to police</u> <u>Disarming a LEO</u>	M	W	<u>30</u>	☐ Yes ☒ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No	<u>Obstruction</u> <u>contempt</u>	M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>BROGLIA, CHRISTOPHER, J.</u>	<u>833</u>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature <u>Chris J. Broglia</u>		Police Officer Assignment <u>TRAFFIC BUREAU</u>			
Supervisor Name		Supervisor Signature			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB30383**

A. Incident Information

Date: 12/23/2015	Time: 1407	Day of Week: Wednesday	Location: 344 Broadway
Type of Incident: ☐ Crime in Progress ☐ Domestic		Type of Person: ☐ Under the Influence	
☐ Suspicious Person ☐ Traffic Violation		☒ Other Type of Call (Specify) Under arrest	
☒ Other Type of Call (Specify) Arrest ☐ Other Dispute			

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Roderick Sanders	☒ Yes ☐ No	2C:39-5B 2C:39-4A(1) 2C:12-1B5A	M	W	48	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired 0 No. of hits UNK Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Kennedy, Joseph V	324	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature			Police Officer Assignment		
			Detective/Forensics		
Supervisor Name			Supervisor Signature		
Lieutenant Grippaldi					

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

A. Incident Information

INCIDENT NUMBER: 1563294

Date: <u>12-11-15</u>	Time: <u>2321</u>	Day of Week: <u>Friday</u>	Location: <u>408 Exchange Place</u>
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☐ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☒ Other Type of Call (Specify) <u>Warrant/TRO Service</u>		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>Samuel F Perry</u>	☒ Yes ☐ No		M	<u>W</u>	<u>35</u>	☐ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒		
...Physical threat/attack on Police Officer	☒		
...Threatened/attacked Police Officer with blunt object			
...Threatened/attacked Police Officer with knife/cutting object			
...Threatened/attacked Police Officer with motor vehicle			
...Threatened Police Officer with firearm			
...Fired at Police Officer			
...Other [Specify]			

D. Type of Force Used (check all that apply)

Type of Force Used: ☐ Compliance Hold	☐ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental
☒ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired ____
☐ Other Force. Specify:		No. of hits ____
		Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>Barysewski, Brian, William</u>	<u>376</u>	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
<u>[Signature]</u>					
Supervisor Name	Supervisor Signature				
<u>CPL. JUAN A VASQUEZ</u>	<u>[Signature]</u> #282				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 151821

A. Incident Information

Date: <u>PL 11/11/15</u>	Time: <u>2321</u>	Day of Week: <u>FRIDAY</u>	Location: <u>4108 FENHANGER</u>
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify) <u>Warrant Search / TAD</u> ☐ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify)

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>PERRY, Samuel F</u>	☒ Yes ☐ No	<u>AGG. ASSAULT RESISTING ARREST</u>	<u>(M)</u>	<u>W</u>	<u>35</u>	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>REYNOLDS, DANIEL S</u>	<u>347</u>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature <u>[Signature]</u>			Police Officer Assignment <u>PATROL</u>		
Supervisor Name <u>CPL. JUAN A VASQUEZ</u>			Supervisor Signature <u>CPL. Juan A Vasquez #283</u>		

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15182

A. Incident Information

Date: <u>12/11/15</u>	Time: <u>2321</u>	Day of Week: <u>FRIDAY</u>	Location: <u>408 FENHANGE</u>
Type of Incident: ☐ Crime in Progress		☒ Domestic	Type of Person: ☐ Under the Influence
☐ Suspicious Person		☐ Traffic Violation	☐ Other Type of Call (Specify)
☒ Other Type of Call (Specify) <u>WARRANT SERVICE / TAD</u>		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>PERRY, Samuel F</u>	☒ Yes ☐ No	<u>AGGRAVATED ASSAULT</u>	☒ M	☒ W	<u>35</u>	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		☐ M ☐ W			☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		☐ M ☐ W			☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold	☐ Hands / Fists	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
☐ Chemical/Natural Agent	☐ Kicks/Feet	
☐ Strike/Use Baton or Other Object	☐ Canine	
☐ Other Force. Specify:		

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>REYNOLDS, DANIEL S</u>	<u>347</u>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
<u>[Signature]</u>	<u>PATROL</u>				
Supervisor Name	Supervisor Signature				
<u>CPL. JUAN A VASQUEZ</u>	<u>CPL. Juan A Vasquez #282</u>				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **15LB30093**

A. Incident Information

Date: 12/19/2015	Time: 1022hrs	Day of Week: Saturday	Location: 344 Broadway
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify) ☒ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Type of Call (Specify) Juvenile

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
JACOBS, CARLOS A	☒ Yes	Resisting Arrest Harassment	M	W	62	☐ Yes	☐ Yes	☐ Yes
	☐ No					☒ No	☒ No	
	☐ Yes					☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No
	☐ Yes					☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired 0 No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
VACCARO, PATRICK R	353	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature: #353		Police Officer Assignment Patrol			
Supervisor Name: Frank T MOREV 254		Supervisor Signature:			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB30383

A. Incident Information

Date: 12/23/2015	Time: 1407	Day of Week: Wednesday	Location: 344 Broadway
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☐ Suspicious Person		☐ Traffic Violation	
☒ Other Type of Call (Specify) Arrest		☐ Other Dispute	
		Type of Person: ☐ Under the Influence	
		☒ Other Type of Call (Specify) Under arrest	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Roderick Sanders	☒ Yes ☐ No	2C:39-5B 2C:39-4A(1) 2C:12-1B5A	M	W	48	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

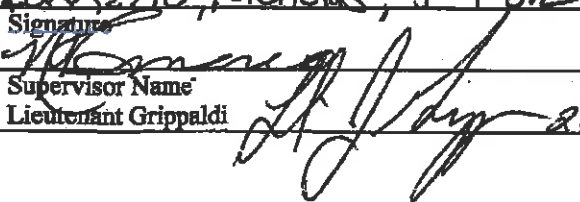
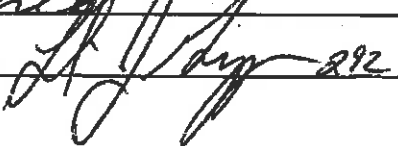
C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired 0 No. of hits UNK Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Ramirez, Nicholas, J	312	☒ Yes ☐ No	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
Signature: 		Police Officer Assignment Street Crimes Unit			
Supervisor Name: Lieutenant Grippaldi		Supervisor Signature: 			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 15LB30383

A. Incident Information

Date: 12/23/2015	Time: 1407	Day of Week: Wednesday	Location: 344 Broadway
Type of Incident: ☐ Crime in Progress		☐ Domestic	
☐ Suspicious Person		☐ Traffic Violation	
☒ Other Type of Call (Specify) Arrest		☐ Other Dispute	
		Type of Person: ☐ Under the Influence	
		☒ Other Type of Call (Specify) Under arrest	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Roderick Sanders	☒ Yes ☐ No	2C:39-5B 2C:39-4A(1) 2C:12-1B5A	M	W	48	☐ Yes ☒ No	☒ Yes ☐ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold	☒ Hands / Fists
☐ Chemical/Natural Agent	☐ Kicks/Feet
☐ Strike/Use Baton or Other Object	☐ Canine
☐ Other Force. Specify:	
Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits <u>UNK</u> Use 'UNK' if unknown	

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Spitalc, Joseph R	339	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment Street Crimes Unit			
Supervisor Name Lieutenant Grippaldi		Supervisor Signature			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 1526300

A. Incident Information

Date: <u>10-19-15</u>	Time: <u>10:10</u>	Day of Week: <u>SATURDAY</u>	Location: <u>344 BROADWAY LB NJ 07740</u>
Type of Incident: ☐ Crime in Progress	☐ Domestic	Type of Person: ☐ Under the Influence	
☐ Suspicious Person	☐ Traffic Violation	☒ Other Type of Call (Specify)	
☒ Other Type of Call (Specify)	☐ Other Dispute	<u>WALK-IN</u>	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
<u>JACOB, CARLOS A</u>	☒ Yes ☐ No	<u>HARASSMENT</u> <u>RESISTING ARREST</u>	<u>M</u>	<u>W</u>	<u>62</u>	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		<u>M</u>	<u>W</u>		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☐ Compliance Hold	☐ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental
☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired <u> </u>
☒ Other Force. Specify: <u>ATTEMPTED TO GET A 1020</u> <u>OF SUSPECT'S ARMS FOR HANDCUFFING</u>		No. of hits <u> </u> Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<u>VASQUEZ, JUAN E</u>	<u>272</u>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
<u>[Signature]</u>	<u>PATROL</u>				
Supervisor Name	Supervisor Signature				
<u>LT. FRANK J. MAREY</u>	<u>[Signature]</u>				