

BOROUGH OF ALLENTOWN

POLICE DEPARTMENT

Monmouth County, New Jersey

8 North Main Street, P.O. Box 487

Allentown, New Jersey, 08501

Telephone: (609)259-3491

Time to Change- Jersey Style,

OPRA Request

#1 through #4 enclosed

#5 The police department doesn't have any Police Use of Deadly Force Attorney General Deadly Notification Reports for the years 2014 to 2017

#6 The requested training information is generally conducted by an outside agency. As a result, we would not keep this information within our agency. Additionally, some of the requested training or certifications are not necessary for this police department.

- Annual basic police academy training would generally be found either with the NJ PTC or the individual county police academy
- Annual firearms requalification training would also be available through the NJ PTC
- Use of Force, Vehicle Pursuit, and Domestic Violence training are conducted each year as per NJ AG Guidelines. A written test is conducted for each, along with practical exercises.
- Allentown PD doesn't have a K-9 or in-house dispatchers.
- Cultural Diversity and Bias Intimidation Crimes Training is not offered on an annual basis, and if it was offered, it would be provided by an outside source.

This information was gathered by Lt. Daniel Panckeri of the Allentown Borough Police Department.



Monmouth County Police Pursuit Report

Agency: Allentown Borough

Reporting Period : 2015

Person Completing Report: Lt. Dan Panckeri

Telephone Number: 609-259-6300

Date Completed: 01/21/16

1. Number of pursuits initiated	0
2. Number of pursuits resulting in accidents	0
3. Number of pursuits resulting in injury (NO DEATHS)	0
4. Number of pursuits resulting in death	0
5. Number of pursuits resulting in arrest	0
6. Number of vehicles in accidents	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
7. Number of people injured	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
d. Pedestrians	0
8. Number of people killed	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
d. Pedestrians	0
9. Number of people arrested	0
10. Number of pursuits in which a tire deflation device was used	0

Do not type into dark shaded areas of the form.



Monmouth County Use of Force Report

Agency: Allentown Borough
Reporting Period: 2015
Person Completing Report: Lt. Dan Panckeri
Telephone Number: 609-259-6300
Date Completed: 01/21/16

Total Number of Incidents which Necessitated The Use of Force		2
Total Number of Persons Against Whom Force Was Used		2
Total Number of Incidents Involving Officer Use of Physical Force	2	
Total Number of Incidents Involving Officer Use of Mechanical Force	0	
Total Number of Incidents Involving Officer Use of Enhanced Mechanical Force	0	
Total Number of Incidents Involving Officer Use of Deadly Force	0	
Total Number of Incidents Involving Officer Use of Physical Force & Mechanical Force	0	
Total Number of Incidents Involving Officer Use of Physical Force & Deadly Force	0	
Total Number of Incidents Involving Officer Use of Mechanical Force & Deadly Force	0	
Total Number of Incidents Involving Officer Use of Physical Force, Mechanical Force & Deadly Force	0	
Total Number of Incidents Involving Any Injury to a Person Resulting from the Use of a Firearm by a Law Enforcement Officer	0	

Do not type into dark shaded areas of the form.

MONMOUTH COUNTY POLICE PURSUIT SUMMARY REPORT

Agency: <i>Allentown Borough</i>	County: <i>Monmouth</i>
Reporting Period: JAN. TO DEC. 2014	
Person Completing Report: <i>Lt. Daniel Panckeri</i>	Date Completed: <i>1-15-15</i>
Telephone Number: <i>609-259-6300</i>	
01. Number of pursuits initiated	<i>Ø</i>
02. Number of pursuits resulting in accidents	<i>Ø</i>
03. Number of pursuits resulting in injury (NO DEATHS)	<i>Ø</i>
04. Number of pursuits resulting in death	<i>Ø</i>
05. Number of pursuits resulting in arrest	<i>Ø</i>
06. Number of vehicles in accidents	<i>Ø</i>
a. Pursued vehicles	<i>Ø</i>
b. Police vehicles	<i>Ø</i>
c. Third party vehicles	<i>Ø</i>
07. Number of people injured	<i>Ø</i>
a. Pursued vehicles	<i>Ø</i>
b. Police vehicles	<i>Ø</i>
c. Third party vehicles	<i>Ø</i>
d. Pedestrians	<i>Ø</i>
08. Number of people killed	<i>Ø</i>
a. Pursued vehicles	<i>Ø</i>
b. Police vehicles	<i>Ø</i>
c. Third party vehicles	<i>Ø</i>
d. Pedestrians	<i>Ø</i>
09. Number of people arrested	<i>Ø</i>
10. Number of pursuits in which a tire deflation device was used	<i>Ø</i>

ANNUAL REPORT USE OF FORCE

NAME OF MUNICIPALITY:

NAME OF INDIVIDUAL COMPLETING REPORT:

TIME PERIOD COVERED BY REPORT: **JAN. TO DEC. 2014**

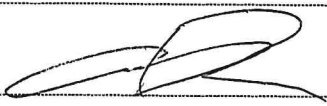
Total Number of Incidents which Necessitated The Use of Force		2
Total Number of Persons Against Whom Force Was Used		2
Total Number of Incidents Involving Officer Use of Physical Force		2
Total Number of Incidents Involving Officer Use of Mechanical Force		Ø
Total Number of Incidents Involving Officer Use of Enhanced Mechanical Force		Ø
Total Number of Incidents Involving Officer Use of Deadly Force		Ø
Total Number of Incidents Involving Officer Use of Physical Force & Mechanical Force		Ø
Total Number of Incidents Involving Officer Use of Physical Force & Deadly Force		Ø
Total Number of Incidents Involving Officer Use of Mechanical Force & Deadly Force		Ø
Total Number of Incidents Involving Officer Use of Physical Force & Mechanical Force & Deadly Force		Ø
Total Number of Incidents Involving Any Injury to a Person Resulting from the Use of a Firearm by a Law Enforcement Officer		Ø



Monmouth County Police Pursuit Report

Agency: ALLENTOWN

Reporting Period : 2016

Person Completing Report: PTL. RANDO  # 8236

Telephone Number: 609-259-6300

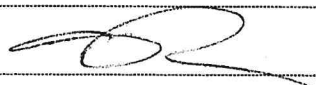
Date Completed: 01/04/2017

1. Number of pursuits initiated	0
2. Number of pursuits resulting in accidents	0
3. Number of pursuits resulting in injury (NO DEATHS)	0
4. Number of pursuits resulting in death	0
5. Number of pursuits resulting in arrest	0
6. Number of vehicles in accidents	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
7. Number of people injured	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
d. Pedestrians	0
8. Number of people killed	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
d. Pedestrians	0
9. Number of people arrested	0
10. Number of pursuits in which a tire deflation device was used	0

Do not type into dark shaded areas of the form.



Monmouth County Use of Force Report

Agency: Allentown
Reporting Period: 2016
Person Completing Report: Ptl. Anthony Rando 
Telephone Number: 609-259-6300
Date Completed: 01/20/2017

Total Number of Incidents which Necessitated The Use of Force		0
Total Number of Persons Against Whom Force Was Used		0
Total Number of Incidents Involving Officer Use of Physical Force	0	
Total Number of Incidents Involving Officer Use of Mechanical Force	0	
Total Number of Incidents Involving Officer Use of Enhanced Mechanical Force	0	
Total Number of Incidents Involving Officer Use of Deadly Force	0	
Total Number of Incidents Involving Officer Use of Physical Force & Mechanical Force	0	
Total Number of Incidents Involving Officer Use of Physical Force & Deadly Force	0	
Total Number of Incidents Involving Officer Use of Mechanical Force & Deadly Force	0	
Total Number of Incidents Involving Officer Use of Physical Force, Mechanical Force & Deadly Force	0	
Total Number of Incidents Involving Any Injury to a Person Resulting from the Use of a Firearm by a Law Enforcement Officer	0	

Do not type into dark shaded areas of the form.

INTERNAL AFFAIRS SUMMARY REPORT

Agency: Allentown Borough

County: Monmouth 2014

Reporting Period: ☐ 1st Quarter (Jan.-Mar.) ☐ 3rd Quarter (July-Sept.) ☒ Annual
☐ 2nd Quarter (Apr.-June) ☐ 4th Quarter (Oct.-Dec.) (End-of-Year)

Type of Complaint	Anonymous Complaints	Citizen Complaints	Agency Complaints	Total Complaints	Sustained	Exonerated	Not Sustained	Unfounded	Administratively Closed	Total Dispositions	Pending Investigations
Excessive Force											
Improper Arrest											
Improper Entry											
Improper Search											
Other Criminal Violation											
Differential Treatment											
Demenor		4		4	2	1		1		4	
Domestic Violence											
Other Rule Violation *			1	1	1					1	
Total		4	1	5	3	1		1		5	

* As defined in the Types of Complaints Section of the AG Guidelines pertaining to Internal Affairs.

Court	Cases Dismissed	Cases Diverted	Acquittals	Convictions
Municipal Court				
Superior Court				
Total	0	0	0	0

INTERNAL AFFAIRS SUMMARY REPORT

Agency: Allentown Borough

County: 2015 Monmouth

Reporting Period: ☐ 1st Quarter (Jan.-Mar.) ☐ 3rd Quarter (July-Sept.) ☒ Annual
☐ 2nd Quarter (Apr.-June) ☐ 4th Quarter (Oct.-Dec.) (End-of-Year)

Type of Complaint	Anonymous Complaints	Citizen Complaints	Agency Complaints	Total Complaints	Sustained	Exonerated	Not Sustained	Unfounded	Administratively Closed	Total Dispositions	Pending Investigations
Excessive Force				0						0	0
Improper Arrest				0						0	0
Improper Entry				0						0	0
Improper Search				0						0	0
Other Criminal Violation				0						0	0
Differential Treatment				0						0	0
Demenor				0						0	0
Domestic Violence		1		1						0	1
Other Rule Violation *			5	5						4	1
Total		1	5	6	4	0	0	0	0	4	2

* As defined in the Types of Complaints Section of the AG Guidelines pertaining to Internal Affairs.

Court	Cases Dismissed	Cases Diverted	Acquittals	Convictions
Municipal Court				
Superior Court				
Total	0	0	0	0

INTERNAL AFFAIRS SUMMARY REPORT

Agency: Allentown

County: 2016 Monmouth

Reporting Period:

☐ 1st Quarter (Jan.-Mar.)
☒ 2nd Quarter (Apr.-June)

☐ 3rd Quarter (July-Sept.)
☐ 4th Quarter (Oct.-Dec.)
☒ Annual (End-of-Year)

Type of Complaint	Anonymous Complaints	Citizen Complaints	Agency Complaints	Total Complaints	Sustained	Exonerated	Not Sustained	Unfounded	Administratively Closed	Total Dispositions	Pending Investigations
Excessive Force				0			2			2	
Improper Arrest		1		1		1				1	
Improper Entry				0						0	
Improper Search				0						0	
Other Criminal Violation				0						0	
Differential Treatment		1		1						1	1
Demeanor				0						0	
Domestic Violence				0						0	
Other Rule Violation *			2	2	2					2	
Total				4	2					6	1

* As defined in the Types of Complaints Section of the AG Guidelines pertaining to Internal Affairs.

Court	Cases Dismissed	Cases Diverted	Acquittals	Convictions
Municipal Court	0	0	0	0
Superior Court	0	0	0	0
Total	0	0	0	0

INCIDENT NUMBER Ops Report

USE OF FORCE REPORT

A. Incident Information

Date <u>2-18-14</u>	Time <u>2:00PM</u>	Day of Week <u>Wednesday</u>	Location <u>20 Broad St</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call ☐ Other Dispute [Specify <u>Crisis</u>]		Type of Person: ☒ Under the Influence ☐ Other Unusual Condition [Specify _____]	

[Check only if unusual condition in person exists]

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

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Morrison Edward</u>	<u>Y(N)</u>	<u>N/A</u>	<u>M</u>	<u>W</u>		<u>Y(N)</u>	<u>Y(N)</u>	<u>(Y)N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

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

C. Level of Suspect(s) Resistance (check all that apply)

Suspect...	Suspect # 1	Suspect # 2	Suspect # 3
...resisted Police Officer control	<u>✓</u>		
...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 Number of Shots Fired _____ Number 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>Panckeri, Daniel</u>	<u>8212</u>	<u>(Y)N</u>	<u>(Y)N</u>	<u>Y(N)</u>	<u>Y(N)</u>
Signature: <u>Lt. [Signature]</u>			Police Officer Assignment:		
Print Supervisor Name: <u>Lt. Daniel Panckeri</u>			Supervisor Signature: <u>[Signature]</u>		

(6/2000)

INCIDENT NUMBER MV-14-09

USE OF FORCE REPORT

A. Incident Information

Date <u>2/23/14</u>	Time <u>5:20 PM</u>	Day of Week <u>Sunday</u>	Location <u>Police HQ</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify <u>914-50</u>) ☐ Other Dispute			Type of Person: ☒ Under the Influence ☐ Other Unusual Condition (Specify _____)

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

(Check only if unusual condition in person exists)

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Cardamone, Carmine</u>	<u>Y/N</u>	<u>3914-50/4-50.2</u>	<u>M</u>	<u>W</u>	<u>34</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

C. Level of Suspect(s) Resistance (check all that apply)

(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 <u>would not leave police station</u>)	<u>✓</u>		

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: <u>physical force</u>	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired <u>0</u> Number of Hits <u>0</u> [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>Rando, Anthony, Robert</u>	<u>8230</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: <u>[Signature]</u>			Supervisor Signature: <u>[Signature]</u>		

INCIDENT NUMBER _____

USE OF FORCE REPORT

A. Incident Information

Date <u>10/30/15</u>	Time <u>2300</u>	Day of Week <u>FRIDAY</u>	Location <u>16 TWAIN DR, ALLENTOWN, NJ</u>
Type of Incident:	☐ Crime in Progress ☐ Suspicious Person ☐ Other Type of Call [Specify _____]	☒ Domestic ☐ Traffic Violation ☐ Other Dispute	Type of Person: ☒ Under the Influence ☐ Other Unusual Condition [Specify _____]

[Check only if unusual condition in person exists]

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

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>STRAMBACK, CHRISTIE, L</u>	<u>Y/N</u>	<u>-</u>	<u>F</u>	<u>W</u>		<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

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

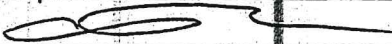
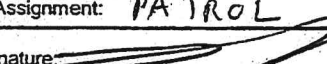
C. Level of Suspect(s) Resistance (check all that apply)

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>LUNGED AT VICTIM IN DANGEROUS MANNER</u>]	<u>✓</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 Number of Shots Fired <u>0</u> Number of Hits <u>0</u> [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>RANDU, ANTHONY, R</u>	<u>#8230</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: 	Police Officer Assignment: <u>PATROL</u>				
Print Supervisor Name: <u>Daniel Poncker #822</u>	Supervisor Signature: 				

(6/2000)

INCIDENT NUMBER 15-17

USE OF FORCE REPORT

A. Incident Information

Date <u>7-13-15</u>	Time <u>12:30pm</u>	Day of Week <u>Tuesday</u>	Location <u>76 Breza Rd</u>
Type of Incident: ☒ Crime in Progress ☐ Suspicious Person ☐ Other Type of Call [Specify _____]		Type of Person: ☐ Under the Influence ☒ Other Unusual Condition [Specify <u>PTSD</u>]	
☐ Domestic ☐ Traffic Violation ☐ Other Dispute			

[Check only if unusual condition in person exists]

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

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Dominick Trishitti</u>	<u>Y/N</u>	<u>NA</u>	<u>M</u>	<u>W</u>	<u>38</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	Y/N					Y/N	Y/N	Y/N
	Y/N					Y/N	Y/N	Y/N

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

C. Level of Suspect(s) Resistance (check all that apply)

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: <u>unholster duty weapon</u>	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired ____ Number 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>Poncker, Daniel</u>	<u>8212</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment:		
Print Supervisor Name: <u>NA</u>			Supervisor Signature: <u>NA</u>		

(6/2000)

INCIDENT NUMBER 17AT01547

USE OF FORCE REPORT

A. Incident Information

Date <u>11-3-17</u>	Time <u>9:53 AM</u>	Day of Week <u>Friday</u>	Location <u>Presbyterian Church, cemetery</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify <u>Suicide JV</u>) ☐ Other Dispute		Type of Person: ☐ Under the Influence ☒ Other Unusual Condition (Specify <u>JV</u>)	

[Check only if unusual condition in person exists]

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

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Paldine, Hanna</u>	<u>Y/N</u>	<u>-</u>	<u>F</u>	<u>W</u>	<u>15</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

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

C. Level of Suspect(s) Resistance (check all that apply)

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 Number of Shots Fired _____ Number 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>STAB, Brian, M</u>	<u>8206</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u> # <u>8206</u>			Police Officer Assignment: <u>Patrol</u>		
Print Supervisor Name:			Supervisor Signature:		

(6/2000)

INCIDENT NUMBER 17AT01547

USE OF FORCE REPORT

A. Incident Information

Date <u>11-3-17</u>	Time <u>9:53 AM</u>	Day of Week <u>FRI</u>	Location <u>PREBYTERIAN CHURCH</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call (Specify <u>1</u>) ☐ Other Dispute		Type of Person: ☐ Under the Influence ☒ Other Unusual Condition (Specify <u>SV</u>)	

[Check only if unusual condition in person exists]

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

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>PALDINO, MANNA</u>	<u>Y/N</u>		<u>F</u>	<u>W</u>	<u>15</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

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

C. Level of Suspect(s) Resistance (check all that apply)

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>1</u>)			

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 Number of Shots Fired ____ Number 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>LERCHE, RICH</u>	<u>8216</u>	<u>Q/N</u>	<u>Q/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>PR [Signature]</u>			Police Officer Assignment: <u>ASSIST</u>		
Print Supervisor Name:			Supervisor Signature:		

(6/2000)

INCIDENT NUMBER 17AT01547

USE OF FORCE REPORT

A. Incident Information

Date <u>11/03/2017</u>	Time <u>9:53AM</u>	Day of Week <u>Friday</u>	Location <u>Presbyterian Church</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify <u>Suicidal</u>) ☐ Other Dispute		Type of Person: ☐ Under the Influence ☒ Other Unusual Condition (Specify <u>JV</u>)	

[Check only if unusual condition in person exists]

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

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Paidino, Hama</u>	<u>Y/N</u>	<u>—</u>	<u>F</u>	<u>W</u>	<u>15</u>	<u>Y/N</u>	<u>Y/N</u>	<u>(Y)N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

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

C. Level of Suspect(s) Resistance (check all that apply)

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 Number of Shots Fired <u>0</u> Number of Hits <u>0</u> [Use 'UNK' if unknown]
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N/A

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>Rando, Anthony, B</u>	<u>8230</u>	<u>(Y)N</u>	<u>(Y)N</u>	<u>Y(N)</u>	<u>(Y)N For transport</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>Assist</u>		
Print Supervisor Name: <u>Lt. Panckeri #8212</u>			Supervisor Signature: _____		

(6/2000)