

Type of Offense: Assault on a peace officer		Incident/DR Number: LC170588		
Location of Incident				
Street Address or Location:		Time: 1742		Date: 4/3/2017
Reporting Officer's Name:	Badge #	Rank	Duty Status:	Attire
Matt Reighard	545	Sergeant	On	Uniform
Involved Officer's Name:	Badge #	Rank	Duty Status:	Attire
Suspect Information				
Suspect Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Animal Group of People: <input type="checkbox"/> Age: 46 Race: W Height: 511 Weight: 225				
Applicable Suspect Conditions (Check all that apply)			Under the Influence	
<input type="checkbox"/> Armed	<input checked="" type="checkbox"/> History of violence		<input checked="" type="checkbox"/> Alcohol	
<input type="checkbox"/> Reported to be armed	<input checked="" type="checkbox"/> Failed to comply		<input type="checkbox"/> Drugs	
<input checked="" type="checkbox"/> Assaulted Deputy	<input type="checkbox"/> Resisted arrest		<input type="checkbox"/> Mental Illness	
<input type="checkbox"/> Assaulted civilian	<input type="checkbox"/> Other: Explain.		<input type="checkbox"/> None Apparent	
<input type="checkbox"/> Attempted escape			<input type="checkbox"/> Other: Explain.	
Use of Force / Control Necessary to:				
<input checked="" type="checkbox"/> Defend Self	<input type="checkbox"/> Protective Custody	<input type="checkbox"/> Other: Explain.		
<input type="checkbox"/> Defend another	<input type="checkbox"/> Prevent Escape	<input checked="" type="checkbox"/> Accomplish official purpose: Escort arrestee to the Detention Center		
<input type="checkbox"/> Make arrest				
Warning Given: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Feasible				
Force Used				
<input checked="" type="checkbox"/> Physical Control:				
Soft Empty Hand Techniques		Hard Empty Hand Techniques		
<input checked="" type="checkbox"/> Escort Position		<input type="checkbox"/> Palm Heel	<input type="checkbox"/> Shoulder Pin Restraint	
<input checked="" type="checkbox"/> Transport Wrist Lock		<input type="checkbox"/> Straight Punch	<input type="checkbox"/> Other: Explain.	
<input type="checkbox"/> Straight Armbar Takedown		<input type="checkbox"/> Brachial Stun		
<input type="checkbox"/> Pressure Points		<input type="checkbox"/> Suprascapular Stun		
<input checked="" type="checkbox"/> Other: Restrain and put to ground		<input type="checkbox"/> Front Thrust Kick		
		<input type="checkbox"/> Knee Strike		
		<input type="checkbox"/> Angle Kick		
<input type="checkbox"/> OC Spray: Discharged: <input type="checkbox"/> Yes <input type="checkbox"/> No Effective: <input type="checkbox"/> Yes <input type="checkbox"/> No				
Exposure: <input type="checkbox"/> Airborne only <input type="checkbox"/> Targeted area		<input type="checkbox"/> Single spray	<input type="checkbox"/> Multiple spray	
Serial number:		Lot number:		
<input type="checkbox"/> Wrap Restraint System				
<input type="checkbox"/> Taser: Discharged: <input type="checkbox"/> Yes <input type="checkbox"/> No Effective: <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, why)				
Exposure:		Cycles: <input type="checkbox"/> 1	<input type="checkbox"/> Heavy clothing	<input type="checkbox"/> Malfunction

Type of Offense: Domestic Disturbance

Incident/DR Number: LC170636

Location of Incident

Street Address or Location:

Reporting Officer's Name:

Badge #

Rank

Time: 1710

Date: 4/11/2017

Matt Reighard

545

Sergeant

Duty Status:

Attire

On

Uniform

Involved Officer's Name:

Badge #

Rank

Duty Status:

Attire

Matt Boudreau

539

Corporal

On

Uniform

Suspect Information

Suspect Sex:  Male  Female  Animal Group of People:  Age: 31 Race: N Height: 511 Weight: 240

Applicable Suspect Conditions (Check all that apply)

- Armed
- Reported to be armed
- Assaulted Deputy
- Assaulted civilian
- Attempted escape
- History of violence
- Failed to comply
- Resisted arrest
- Other: Explain.

Under the Influence

- Alcohol
- Drugs
- Mental Illness
- None Apparent
- Other: Explain.

Use of Force / Control Necessary to:

- Defend Self
- Defend another
- Make arrest
- Protective Custody
- Prevent Escape
- Other: Explain.
- Accomplish official purpose: Explain.

Warning Given:  Yes  No  Not Feasible

Force Used

Physical Control:

Soft Empty Hand Techniques

- Escort Position
- Transport Wrist Lock
- Straight Armbar Takedown
- Pressure Points
- Other: Explain.

Hard Empty Hand Techniques

- Palm Heel
- Straight Punch
- Brachial Stun
- Suprascapular Stun
- Front Thrust Kick
- Knee Strike
- Angle Kick

Shoulder Pin Restraint

Other: Explain.

OC Spray: Discharged:  Yes  No Effective:  Yes  No

Exposure:  Airborne only  Targeted area  Single spray  Multiple spray

Serial number:

Lot number:

Wrap Restraint System

Taser: Discharged:  Yes  No Effective:  Yes  No (If no, why)

Exposure: Cycles:  1  Heavy clothing  Malfunction

- Drive stun  2
- Cartridge discharge  3
- Close probe strikes
- Missed
- No physical effect



Taser Serial Number:

Cartridge(s) Serial Number:

Impact Weapons

Effective:  Yes  No

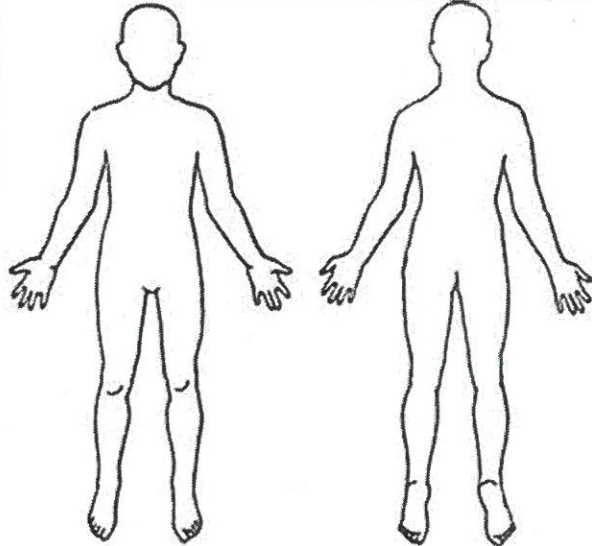
Baton  Vehicle  Other: Explain.

Firearms: Discharged:  Yes  No

Pistol  AR-15  Shotgun  Other:

Number of rounds fired: Serial number of firearm(s) used:

Indicate Impact Zones on Suspect



Injuries

Officer	Suspect
<input checked="" type="checkbox"/> None	<input checked="" type="checkbox"/> None
<input type="checkbox"/> Bruises	<input type="checkbox"/> Bruises
<input type="checkbox"/> Abrasions	<input type="checkbox"/> Abrasions
<input type="checkbox"/> Lacerations	<input type="checkbox"/> Lacerations
<input type="checkbox"/> Broken Bones	<input type="checkbox"/> Broken Bones
<input type="checkbox"/> Other: Explain	<input type="checkbox"/> Other: Explain

Check by Medical

Officer:  Yes  No  
Suspect:  Yes  No

Transported to Hospital

Officer:  Yes  No  
Suspect:  Yes  No

After Action Report: Dispatched to 11 call reported there was a male and female in what appeared to be a physical altercation. Corporal Boudreau arrived on scene first and stated he could hear yelling inside the residence. Corporal Boudreau made multiple attempts to make contact and no one would answer the door. Due to the initial complaint and the yelling inside the residence, Corporal Boudreau made entry into the residence where he made contact with a female. Female initially denied there was anyone else in the residence but later told Corporal Boudreau the male might have left out of a window in the residence. Corporal Boudreau was holding his position on a bedroom door with his weapon drawn. Corporal Boudreau indicated he believed the male was inside the bedroom and it was unknown what he was doing inside the bedroom. Due to the nature of the call and the male not complying with Corporal Boudreau's instructions to come out I drew my Taser as a less lethal option while Corporal Boudreau had his pistol out. Corporal Boudreau utilized his foot and kicked the bedroom door open, not causing any damage due to the door being partially opened. Once the door was open we saw the male kneeling near the bed. We entered the bedroom and instructed the to place his hands behind his back. The male complied and I secured his hands in handcuffs, checking tightness and double locking them.

Reporting Officer Signature:

*[Handwritten Signature]*

Date: 4/17/2017

Supervisor Signature:

*[Handwritten Signature]*

Date: 4-17-17







Case: Civil, reported as burglary Incident/DR Number: CFS 050818-203

Location of Incident

Street Address or Location			Time: 2351	Date: 5/8/2018
Reporting Officer's Name:	Badge #	Rank	Duty Status:	Attire
Andy Haegele	552	Senior Deputy	On	Uniform
Involved Officer's Name:	Badge #	Rank	Duty Status:	Attire
Kevin Wright	565	Sergeant	On	Uniform
Neil Marks	543	Deputy	On	Uniform
Ken Getz	533	Corporal	On	

Suspect Information

Suspect:  Male  Female  Animal  Group of People:  
 Age: 28 Race: White Height: 5'11" Weight: 165 Age: 40 Race: White Height: 5'6" Weight: 125 Age:  
 Race: Height: Weight:

Applicable Suspect Conditions (Check all that apply)

- Armed  History of violence
- Reported to be armed  Failed to comply
- Assaulted Deputy  Resisted arrest
- Assaulted civilian  Other:
- Attempted escape

Under the Influence

- Alcohol
- Drugs
- Mental Illness
- None Apparent
- Other: Explain.

Use of Force / Control Necessary to:

- Defend Self  Protective Custody  Other:
- Defend another  Prevent Escape  Accomplish official purpose: Explain.
- Make arrest

Commands Given:  Yes  No  Not Feasible Video:  Yes  No If No, explain in comments

Force Used

Physical Control:

Effective:  Yes  No

- Soft Empty Hand Techniques
- Escort Position
  - Transport Wrist Lock
  - Straight Armbar Takedown
  - Pressure Points
  - Other:

Hard Empty Hand Techniques

- Palm Heel
- Straight Punch
- Brachial Stun
- Suprascapular Stun
- Front Thrust Kick

- Shoulder Pin Restraint
- Knee Strike
- Angle Kick
- Other: Explain.

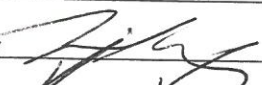
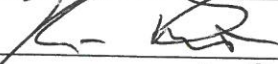


OC Spray: Discharged:  Yes  No Effective:  Yes  No

Exposure:  Airborne only  Targeted area  Single spray  Multiple spray

Serial number: Click here to enter text. Lot number: Click here to enter text.

Wrap Restraint System



Reporting Officer Signature: 	Date: 5/9/18
Supervisor Signature: 	Date: 5/9/18
Division Commander Signature: 	Date: 5-9-18
Under Sheriff Signature: 	Date: 5/10/18
Comments:	



Type of Offense: Resisting Arrest Incident/DR Number: LC170644

Location of Incident

Street Address or Location Time: 2035 Date: 4/12/2017

Reporting Officer's Name: Badge # Rank Duty Status: Attire

Matt Reighard 545 Sergeant On Uniform

Involved Officer's Name: Badge # Rank Duty Status: Attire

Joani Boudreau 563 Deputy On Uniform

Suspect Information

Suspect Sex:  Male  Female  Animal Group of People:  Age: 26 Race: W Height: 602 Weight: 210

Applicable Suspect Conditions (Check all that apply)		Under the Influence
<input type="checkbox"/> Armed	<input type="checkbox"/> History of violence	<input type="checkbox"/> Alcohol
<input type="checkbox"/> Reported to be armed	<input checked="" type="checkbox"/> Failed to comply	<input type="checkbox"/> Drugs
<input type="checkbox"/> Assaulted Deputy	<input checked="" type="checkbox"/> Resisted arrest	<input type="checkbox"/> Mental Illness
<input type="checkbox"/> Assaulted civilian	<input type="checkbox"/> Other: Explain.	<input checked="" type="checkbox"/> None Apparent
<input type="checkbox"/> Attempted escape		<input type="checkbox"/> Other: Explain.

Use of Force / Control Necessary to:

Defend Self  Protective Custody  Other: Explain.

Defend another  Prevent Escape  Accomplish official purpose: Explain.

Make arrest

Warning Given:  Yes  No  Not Feasible

Force Used

Physical Control:

Soft Empty Hand Techniques	Hard Empty Hand Techniques	
<input type="checkbox"/> Escort Position	<input type="checkbox"/> Palm Heel	<input type="checkbox"/> Shoulder Pin Restraint
<input checked="" type="checkbox"/> Transport Wrist Lock	<input type="checkbox"/> Straight Punch	<input type="checkbox"/> Other: Explain.
<input type="checkbox"/> Straight Armbar Takedown	<input type="checkbox"/> Brachial Stun	
<input type="checkbox"/> Pressure Points	<input type="checkbox"/> Suprascapular Stun	
<input type="checkbox"/> Other: Explain.	<input type="checkbox"/> Front Thrust Kick	
	<input type="checkbox"/> Knee Strike	
	<input type="checkbox"/> Angle Kick	

OC Spray: Discharged:  Yes  No Effective:  Yes  No  
Exposure:  Airborne only  Targeted area  Single spray  Multiple spray  
Serial number: Lot number:

Wrap Restraint System

Taser: Discharged:  Yes  No Effective:  Yes  No (Not a good connection)

Exposure: Cycles:  1  Heavy clothing  Malfunction

Drive stun  2  Close probe strikes  No physical effect  
 Cartridge discharge  3  Missed



Taser Serial Number: X12005PVK

Cartridge(s) Serial Number: C4105RY4W

Impact Weapons

Effective:  Yes  No

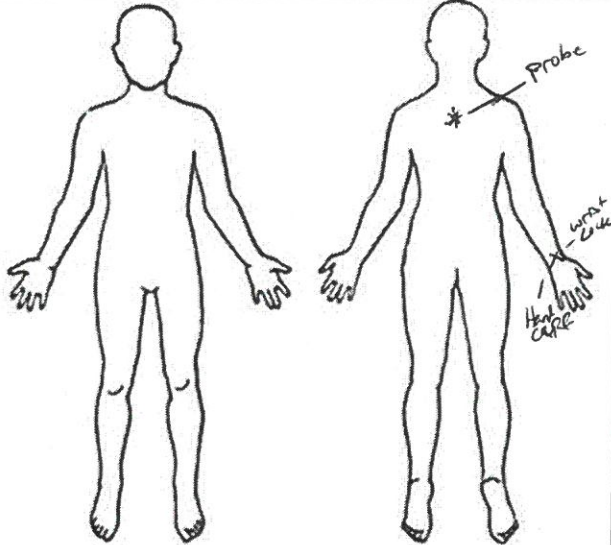
Baton  Vehicle  Other: Explain.

Firearms: Discharged:  Yes  No

Pistol  AR-15  Shotgun  Other:

Number of rounds fired: Serial number of firearm(s) used:

Indicate Impact Zones on Suspect



Injuries

Officer

Suspect

- |   |   |
|---|---|
| <input type="checkbox"/> None                 | <input type="checkbox"/> None               |
| <input type="checkbox"/> Bruises              | <input checked="" type="checkbox"/> Bruises |
| <input checked="" type="checkbox"/> Abrasions | <input type="checkbox"/> Abrasions          |
| <input type="checkbox"/> Lacerations          | <input type="checkbox"/> Lacerations        |
| <input type="checkbox"/> Broken Bones         | <input type="checkbox"/> Broken Bones       |
| <input type="checkbox"/> Other: Explain       | <input type="checkbox"/> Other: Explain     |

Check by Medical

Officer:  Yes  No

Suspect:  Yes  No

Transported to Hospital

Officer:  Yes  No

Suspect:  Yes  No

After Action Report: Traffic stop, the driver of the vehicle was a Revoked Habitual Offender currently under the supervision of Montana Probation and Parole. During the course of the traffic stop it had been determined the driver was going to be placed under arrest for driving as a Revoked Habitual Offender and for violating his probation. I secured the males right arm as Deputy Boudreau was obtaining her handcuffs, the male leaned back to inquire why he was being placed under arrest. As I told him why he was being placed under arrest he began to pull away from our grip. He spun around and was able to break free from our control and began to run away heading northbound on Leisure Drive. Both Deputy Boudreau and I began to chase after the male. Due to the male resisting arrest, being a felon, children just getting out of school and the male running in an area where there was a risk he could possibly try to enter a residence, I drew my Taser (#11) and deployed one cartridge, aiming it at his back. The Taser deployment had minimal to no effect on the male and he continued to run. I later located the male hiding between a garage and a shed at [redacted] I had my pistol drawn and began commanding the male to show me his hands. The male showed me his hands, but would not come out from this area as instructed. Deputy Boudreau and I began to pull the male out from between the garage and the shed and subsequently secured both of his hands in handcuffs. Due to the male being exposed to the Taser and complaining of pain to his wrist we requested medical units respond to our location provide medical aid.

Reporting Officer Signature: *[Signature]*

Date: 4/17/2017

Supervisor Signature: *[Signature]*

Date: 4-17-17



**TASER Information**

**Serial** X12005PVK  
**Model** TASER X26P  
**Firmware Version** Rev. 04.030  
**Application Version** 3.15.51  
**Health** Good

**Offline Report**

**Local Timezone** Mountain Daylight Time (UTC -06:00)  
**Generated On** 12 Apr 2017 17:53:53

**Dates from : Wed Apr 12 14:00:00 2017 to : Wed Apr 12 18:00:00 2017**

**Device (X26P)**

Seq #	Local Time [DD:MM:YYYY hh:mm:ss]	Event [Event Type]	Duration [Seconds]	Temp [Degrees Celsius]	Batt Remaining [%]
891	12 Apr 2017 15:59:41	Armed		24	93
892	12 Apr 2017 15:59:41	Safe	0	23	93
893	12 Apr 2017 15:59:42	Armed		24	93
894	12 Apr 2017 15:59:43	Trigger	2		93
895	12 Apr 2017 15:59:44	Safe	2	24	93
896	12 Apr 2017 15:59:51	Armed		24	93
897	12 Apr 2017 15:59:56	Safe	5	24	93
898	12 Apr 2017 17:25:38	USB Connected			
899	12 Apr 2017 17:22:59	Time Sync	12 Apr 2017 17:25:50 to 12 Apr 2017 17:22:59		
900	12 Apr 2017 17:23:14	Time Sync	12 Apr 2017 17:23:14 to 12 Apr 2017 17:23:14		

PS: 4/29/2027  
565



Type of Offense: Disorderly / agency assist		Incident/DR Number: HP176450-1		
<b>Location of Incident</b>				
Street Address or Location		Time: 1705	Date: 11/25/2017	
Reporting Officer's Name:	Badge #	Rank	Duty Status:	Attire
Uriah S. Wood	525	Sgt.	On	Uniform
Involved Officer's Name:	Badge #	Rank	Duty Status:	Attire
Click here to enter text.	Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.	Click here to enter text.		
<b>Suspect Information</b>				
Suspect Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Animal Group of People: <input checked="" type="checkbox"/> Age: 28 Race: Height: 6 Weight: 160				
Applicable Suspect Conditions (Check all that apply)			Under the Influence	
<input type="checkbox"/> Armed	<input type="checkbox"/> History of violence		<input type="checkbox"/> Alcohol	
<input checked="" type="checkbox"/> Reported to be armed	<input checked="" type="checkbox"/> Failed to comply		<input type="checkbox"/> Drugs	
<input type="checkbox"/> Assaulted Deputy	<input type="checkbox"/> Resisted arrest		<input type="checkbox"/> Mental Illness	
<input type="checkbox"/> Assaulted civilian	<input type="checkbox"/> Other: Assaulted Detention Officer		<input checked="" type="checkbox"/> None Apparent	
<input type="checkbox"/> Attempted escape			<input type="checkbox"/> Other: Explain.	
Use of Force / Control Necessary to:				
<input checked="" type="checkbox"/> Defend Self	<input type="checkbox"/> Protective Custody	<input type="checkbox"/> Other:		
<input type="checkbox"/> Defend another	<input checked="" type="checkbox"/> Prevent Escape	<input type="checkbox"/> Accomplish official purpose: Detain for HPD		
<input type="checkbox"/> Make arrest				
Warning Given: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Feasible				
<b>Force Used</b>				
<input type="checkbox"/> Physical Control:				
Soft Empty Hand Techniques		Hard Empty Hand Techniques		
<input type="checkbox"/> Escort Position	<input type="checkbox"/> Palm Heel	<input type="checkbox"/> Shoulder Pin Restraint		
<input type="checkbox"/> Transport Wrist Lock	<input type="checkbox"/> Straight Punch	<input type="checkbox"/> Other: Explain.		
<input type="checkbox"/> Straight Armbar Takedown	<input type="checkbox"/> Brachial Stun			
<input type="checkbox"/> Pressure Points	<input type="checkbox"/> Suprascapular Stun			
<input type="checkbox"/> Other:	<input type="checkbox"/> Front Thrust Kick			
	<input type="checkbox"/> Knee Strike			
	<input type="checkbox"/> Angle Kick			
<input checked="" type="checkbox"/> OC Spray: Discharged: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Effective: <input type="checkbox"/> Yes <input type="checkbox"/> No				
Exposure: <input type="checkbox"/> Airborne only <input checked="" type="checkbox"/> Targeted area <input type="checkbox"/> Single spray <input checked="" type="checkbox"/> Multiple spray				
Serial number: FX373118 Lot number: OCX2-035				
<input type="checkbox"/> Wrap Restraint System				
<input type="checkbox"/> Taser: Discharged: <input type="checkbox"/> Yes <input type="checkbox"/> No Effective: <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, why)				



Exposure:	Cycles: <input type="checkbox"/> 1	<input type="checkbox"/> Heavy clothing	<input type="checkbox"/> Malfunction
<input type="checkbox"/> Drive stun	<input type="checkbox"/> 2	<input type="checkbox"/> Close probe strikes	<input type="checkbox"/> No physical effect
<input type="checkbox"/> Cartridge discharge	<input type="checkbox"/> 3	<input type="checkbox"/> Missed	

Taser Serial Number: \_\_\_\_\_ Cartridge(s) Serial Number: \_\_\_\_\_

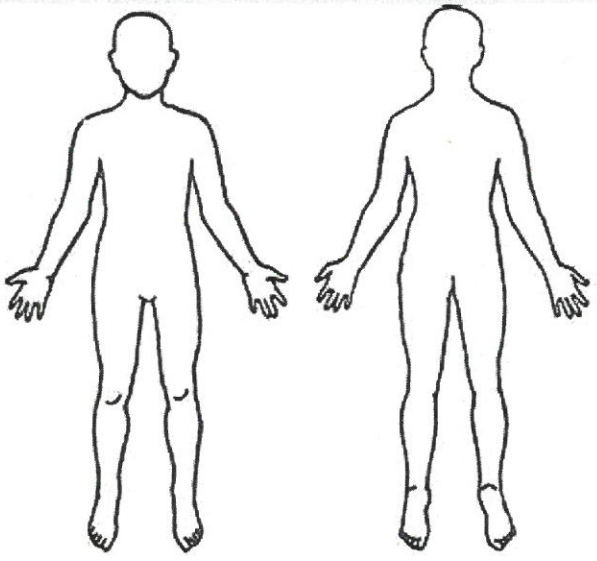
Impact Weapons Effective:  Yes  No

Baton  Vehicle  Other: Explain.

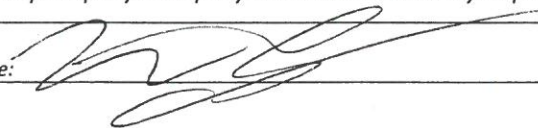
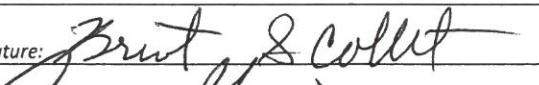

Firearms: Discharged:  Yes  No

Pistol  AR-15  Shotgun  Other:


Number of rounds fired: Click here to enter text. Serial number of firearm(s) used: Click here to enter text.

<p align="center">Indicate Impact Zones on Suspect</p> 	Injuries	
	Officer	Suspect
	<input type="checkbox"/> None <input type="checkbox"/> Bruises <input type="checkbox"/> Abrasions <input type="checkbox"/> Lacerations <input type="checkbox"/> Broken Bones <input checked="" type="checkbox"/> Other: EXPOSURE	<input type="checkbox"/> None <input type="checkbox"/> Bruises <input type="checkbox"/> Abrasions <input type="checkbox"/> Lacerations <input type="checkbox"/> Broken Bones <input checked="" type="checkbox"/> Other: EXPOSURE
Check by Medical		
	Officer: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Suspect: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Transported to Hospital		
	Officer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Suspect: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

After Action Report: Driver and passenger refused to comply with deputies orders at gunpoint. Extremely agitated, yelling and advancing while refusing to comply. OC deployed on driver at about 20 foot distance forcing multiple sprays. Deputy received secondary exposure from wind. Driver detained.

Reporting Officer Signature: 	Date: 11-25-17
Supervisor Signature:	Date:
Division Commander Signature: 	Date: 11-30-17
Under Sheriff Signature: 	Date: 11/30/17

Comments: SHAME, WAS O.C. SPRAY MOST APPROPRIATE <sup>(EFFECTIVE)</sup> LESS LETHAL TOOL TO BE USED AT A DISTANCE OF 20 FEET?



PS: 4/29/2024  
565



Type of Offense: Assault		Incident/DR Number: LC172349		
Location of Incident				
Street Address or Location			Time: 1429	Date: 12/18/2017
Reporting Officer's Name:	Badge #	Rank	Duty Status:	Attire
Luke Eidt	537	Deputy	On	Uniform
Involved Officer's Name:	Badge #	Rank	Duty Status:	Attire
Click here to enter text.	Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.	Click here to enter text.		
Suspect Information				
Suspect Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Animal Group of People: <input type="checkbox"/> Age: 57 Race: W Height: 510 Weight: 230				
Applicable Suspect Conditions (Check all that apply)			Under the Influence	
<input type="checkbox"/> Armed	<input type="checkbox"/> History of violence		<input type="checkbox"/> Alcohol	
<input type="checkbox"/> Reported to be armed	<input checked="" type="checkbox"/> Failed to comply		<input type="checkbox"/> Drugs	
<input type="checkbox"/> Assaulted Deputy	<input type="checkbox"/> Resisted arrest		<input type="checkbox"/> Mental Illness	
<input checked="" type="checkbox"/> Assaulted civilian	<input checked="" type="checkbox"/> Other: Unknown if armed was seen running to close a gate at the location of a reported assault.		<input type="checkbox"/> None Apparent	
<input type="checkbox"/> Attempted escape			<input checked="" type="checkbox"/> Other: Lives at residence with known drug activity	
Use of Force / Control Necessary to:				
<input type="checkbox"/> Defend Self	<input type="checkbox"/> Protective Custody	<input type="checkbox"/> Other:		
<input type="checkbox"/> Defend another	<input type="checkbox"/> Prevent Escape	<input checked="" type="checkbox"/> Accomplish official purpose: Detain as a possible suspect in an assault		
<input type="checkbox"/> Make arrest				
Warning Given: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Feasible				
Force Used				
<input type="checkbox"/> Physical Control:				
Soft Empty Hand Techniques		Hard Empty Hand Techniques		
<input type="checkbox"/> Escort Position	<input type="checkbox"/> Transport Wrist Lock	<input type="checkbox"/> Palm Heel	<input type="checkbox"/> Straight Punch	<input type="checkbox"/> Shoulder Pin Restraint
<input type="checkbox"/> Straight Armbar Takedown	<input type="checkbox"/> Pressure Points	<input type="checkbox"/> Brachial Stun	<input type="checkbox"/> Suprascapular Stun	<input type="checkbox"/> Other: Explain.
<input type="checkbox"/> Other:		<input type="checkbox"/> Front Thrust Kick	<input type="checkbox"/> Knee Strike	
		<input type="checkbox"/> Angle Kick		
<input type="checkbox"/> OC Spray: Discharged: <input type="checkbox"/> Yes <input type="checkbox"/> No Effective: <input type="checkbox"/> Yes <input type="checkbox"/> No				
Exposure: <input type="checkbox"/> Airborne only <input type="checkbox"/> Targeted area <input type="checkbox"/> Single spray <input type="checkbox"/> Multiple spray				
Serial number: Click here to enter text. Lot number: Click here to enter text.				
<input type="checkbox"/> Wrap Restraint System				










PJ. 11/20/2016  
565



Type of Offense: Fleeing or eluding		Incident/DR Number: LC170322		
<b>Location of Incident</b>				
Street Address or Location			Time: 2105 hours	Date: 12/19/2016
Reporting Officer's Name:	Badge #	Rank	Duty Status:	Attire
Haegele, Michael	552	Patrolman	On	Uniform
Involved Officer's Name:	Badge #	Rank	Duty Status:	Attire
Click here to enter text.	Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.	Click here to enter text.		
<b>Suspect Information</b>				
Suspect Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Animal Group of People: <input checked="" type="checkbox"/> Age: 31 Race: white Height: 6'2" Weight: 190lbs				
Applicable Suspect Conditions (Check all that apply)			Under the Influence	
<input type="checkbox"/> Armed	<input type="checkbox"/> History of violence		<input type="checkbox"/> Alcohol	
<input type="checkbox"/> Reported to be armed	<input type="checkbox"/> Failed to comply		<input type="checkbox"/> Drugs	
<input type="checkbox"/> Assaulted Deputy	<input type="checkbox"/> Resisted arrest		<input type="checkbox"/> Mental Illness	
<input type="checkbox"/> Assaulted civilian	<input checked="" type="checkbox"/> Other: Ran from Deputies and hid		<input checked="" type="checkbox"/> None Apparent	
<input type="checkbox"/> Attempted escape			<input type="checkbox"/> Other: Explain.	
Use of Force / Control Necessary to:				
<input type="checkbox"/> Defend Self	<input type="checkbox"/> Protective Custody	<input type="checkbox"/> Other: Explain.		
<input type="checkbox"/> Defend another	<input type="checkbox"/> Prevent Escape	<input type="checkbox"/> Accomplish official purpose: Explain.		
<input checked="" type="checkbox"/> Make arrest				
Warning Given: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Feasible				
<b>Force Used</b>				
<input type="checkbox"/> Physical Control:				
Soft Empty Hand Techniques		Hard Empty Hand Techniques		
<input type="checkbox"/> Escort Position	<input type="checkbox"/> Palm Heel		<input type="checkbox"/> Shoulder Pin Restraint	
<input type="checkbox"/> Transport Wrist Lock	<input type="checkbox"/> Straight Punch		<input type="checkbox"/> Other: Explain.	
<input type="checkbox"/> Straight Armbar Takedown	<input type="checkbox"/> Brachial Stun			
<input type="checkbox"/> Pressure Points	<input type="checkbox"/> Suprascapular Stun			
<input type="checkbox"/> Other:	<input type="checkbox"/> Front Thrust Kick			
	<input type="checkbox"/> Knee Strike			
	<input type="checkbox"/> Angle Kick			
<input type="checkbox"/> OC Spray: Discharged: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Effective: <input type="checkbox"/> Yes <input type="checkbox"/> No				
Exposure: <input type="checkbox"/> Airborne only <input type="checkbox"/> Targeted area <input type="checkbox"/> Single spray <input type="checkbox"/> Multiple spray				
Serial number: Click here to enter text. Lot number: Click here to enter text.				



Supervisor Signature: 	Date: 2-24-17
Division Commander Signature: 	Date: 2-24-17
Under Sheriff Signature: 	Date: 2/24/17
Comments:	



P2, 7124 12024  
565



Type of Offense: Assault with a weapon Incident/DR Number: LC172413

Location of Incident

Street Address or Location.			Time: 1402	Date: 12/30/2017
Reporting Officer's Name:	Badge #	Rank	Duty Status:	Attire
GALAHAN	550	PROBATIONARY DEPUTY	On	Uniform
Involved Officer's Name:	Badge #	Rank	Duty Status:	Attire
GALAHAN	550	PROBATIONARY DEPUTY	On	Uniform
SCHMIDT	562	DEPUTY	On	Uniform
Click here to enter text.	Click here to enter text.	Click here to enter text.		

Suspect Information

Suspect Sex:  Male  Female  Animal Group of People:  Age: 26 Race: WHITE  
Height: 6'00" Weight: 168

Applicable Suspect Conditions (Check all that apply)		Under the Influence
<input type="checkbox"/> Armed	<input type="checkbox"/> History of violence	<input type="checkbox"/> Alcohol
<input checked="" type="checkbox"/> Reported to be armed	<input type="checkbox"/> Failed to comply	<input type="checkbox"/> Drugs
<input type="checkbox"/> Assaulted Deputy	<input type="checkbox"/> Resisted arrest	<input type="checkbox"/> Mental Illness
<input type="checkbox"/> Assaulted civilian	<input type="checkbox"/> Other:	<input type="checkbox"/> None Apparent
<input type="checkbox"/> Attempted escape		<input type="checkbox"/> Other: Explain.

Use of Force / Control Necessary to:

Defend Self  Protective Custody  Other:

Defend another  Prevent Escape  Accomplish official purpose: Explain.

Make arrest

Warning Given:  Yes  No  Not Feasible

Force Used

Physical Control:

Soft Empty Hand Techniques	Hard Empty Hand Techniques	
<input type="checkbox"/> Escort Position	<input type="checkbox"/> Palm Heel	<input type="checkbox"/> Shoulder Pin Restraint
<input type="checkbox"/> Transport Wrist Lock	<input type="checkbox"/> Straight Punch	<input type="checkbox"/> Other: Explain.
<input type="checkbox"/> Straight Armbar Takedown	<input type="checkbox"/> Brachial Stun	
<input type="checkbox"/> Pressure Points	<input type="checkbox"/> Suprascapular Stun	
<input type="checkbox"/> Other:	<input type="checkbox"/> Front Thrust Kick	
	<input type="checkbox"/> Knee Strike	
	<input type="checkbox"/> Angle Kick	

OC Spray: Discharged:  Yes  No Effective:  Yes  No

Exposure:  Airborne only  Targeted area  Single spray  Multiple spray

Serial number: Click here to enter text. Lot number: Click here to enter text.

Wrap Restraint System

Taser: Discharged:  Yes  No Effective:  Yes  No (If no, why)

Exposure: Cycles:  1  Heavy clothing  Malfunction

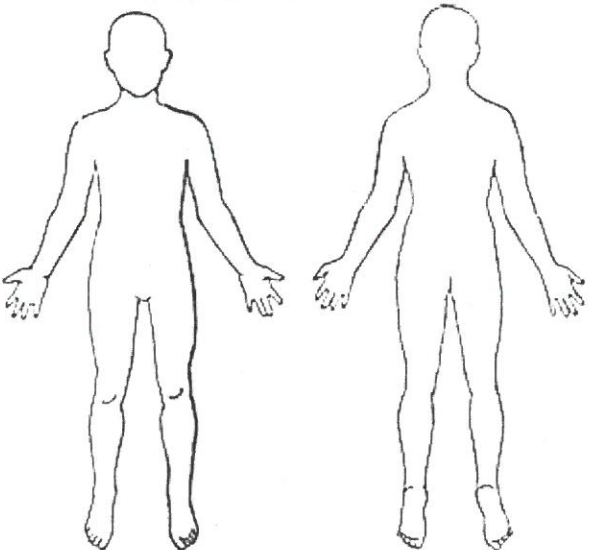
Drive stun  2  Close probe strikes  No physical effect  
 Cartridge discharge  3  Missed

Taser Serial Number: Cartridge(s) Serial Number:

Impact Weapons Effective:  Yes  No

Baton  Vehicle  Other: Explain.

Firearms: Discharged:  Yes  No  
 Pistol  AR-15  Shotgun  Other:  
 Number of rounds fired: 0 Serial number of firearm(s) used: USW351 & VCP525

Indicate Impact Zones on Suspect	Injuries	
	<b>Officer</b> <input checked="" type="checkbox"/> None <input type="checkbox"/> Bruises <input type="checkbox"/> Abrasions <input type="checkbox"/> Lacerations <input type="checkbox"/> Broken Bones <input type="checkbox"/> Other: Explain	<b>Suspect</b> <input checked="" type="checkbox"/> None <input type="checkbox"/> Bruises <input type="checkbox"/> Abrasions <input type="checkbox"/> Lacerations <input type="checkbox"/> Broken Bones <input type="checkbox"/> Other: Explain
	<b>Check by Medical</b> Officer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Suspect: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	<b>Transported to Hospital</b> Officer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Suspect: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

After Action Report: After Action Report: Deputies were dispatched to \_\_\_\_\_ for a reported altercation between two males and one of the males attempting to light the other male on fire by throwing lighter fluid on him. Additional call came in from the complainant to dispatch stating the other male had stabbed his girlfriend and killed her. When Deputies arrived at the residence, a male exited the residence and was ordered at gunpoint to walk backwards where he was detained with handcuffs. After an investigation was completed, the male was arrested for assault with a weapon and negligent arson.

Reporting Officer Signature: <i>Tony Galaban</i>	Date: 1/1/18
Supervisor Signature: <i>[Signature]</i> 545	Date: 1/1/18
Division Commander Signature: <i>[Signature]</i>	Date: 1-3-18
Under Sheriff Signature: <i>[Signature]</i>	Date: 1/4/18

Comments: