



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case #	17-009687	Officer:	Martens, Alexander	Date:	6/22/2017	Time:	2333	Day:	Thursday	
Attached Reports: (Check All That Apply)										
<input checked="" type="checkbox"/> Incident Report			<input checked="" type="checkbox"/> Arrest Report			<input checked="" type="checkbox"/> Booking Photo				
Was an arrest made?		Suspect Name:				OIC at time of Incident:				
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Morse, Sonny				Sgt. Brown				
Suspect Information: CHECK ALL THAT APPLY										
<input type="checkbox"/> Armed with a deadly weapon					<input type="checkbox"/> Armed with a non-deadly weapon					
<input checked="" type="checkbox"/> Not armed					<input checked="" type="checkbox"/> Had been drinking					
<input checked="" type="checkbox"/> Impaired or Intoxicated					<input type="checkbox"/> Under the influence of drugs					
<input checked="" type="checkbox"/> Agitated prior to police arrival					<input type="checkbox"/> Any disability (describe):					
<input type="checkbox"/> Language barrier (if so, language spoken)										
Type of Force Used: CHECK ALL THAT APPLY										
<u>Soft Hand Control</u>			<u>Hard Hand Control</u>			<u>Firearm</u>				
<input type="checkbox"/> Joint Manipulation			<input type="checkbox"/> Open Hand Strike			<input type="checkbox"/> Handgun Deployed		<input type="checkbox"/> Less Lethal- 12 Ga- Deployed		
<input type="checkbox"/> Pressure Point Control			<input type="checkbox"/> Kick			<input type="checkbox"/> Handgun Used		<input type="checkbox"/> Less Lethal- 12 Ga- Used		
<u>Secondary Weapon System</u>			<input type="checkbox"/> Knee Strike			<input type="checkbox"/> Rifle Deployed		<input type="checkbox"/> Less Lethal- 40 mm- Deployed		
<input type="checkbox"/> OC			<input checked="" type="checkbox"/> Take Down			<input type="checkbox"/> Rifle Used		<input type="checkbox"/> Less Lethal- 40 mm- Used		
<input type="checkbox"/> Baton			<input type="checkbox"/> Other (describe)			<input type="checkbox"/> Shotgun Deployed		<input type="checkbox"/> Noise Flash Device		
<input type="checkbox"/> K-9						<input type="checkbox"/> Shotgun Used		<input type="checkbox"/> Gas Deployment- OC/CS		
<input type="checkbox"/> Other (describe)										
<input type="checkbox"/> Taser										
Injury Information										
Were any injuries sustained to officer?				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, describe below...				
Were any injuries sustained to suspect?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, describe below...				
Bruise on right cheek and cut to left index finger										
Was medical attention provided?				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, describe below...				
Subject was too agitated and uncooperative										
Describe the effects of the force used on any persons involved, and any decontamination method used if any....										
take down was effective in gaining control of subject										
Officer Information										
# of officers present		2		# of officers injured:		0				
Officer description:		<input checked="" type="checkbox"/> Uniform		<input type="checkbox"/> Plain Clothes						
Duty Status:		<input checked="" type="checkbox"/> On Duty		<input type="checkbox"/> Off Duty		<input type="checkbox"/> On Duty Detail/Location				
Route/Assignment:		<input checked="" type="checkbox"/> Verbal Commands used Before		<input checked="" type="checkbox"/> Verbal Commands Used During		<input checked="" type="checkbox"/> Verbal Commands Used After				
Miscellaneous Information										
Offense/Charge:										
Lighting:		<input type="checkbox"/> Daylight		<input checked="" type="checkbox"/> Artificial		<input checked="" type="checkbox"/> Low Light		<input type="checkbox"/> Darkness		
Location:		<input type="checkbox"/> Indoors		<input type="checkbox"/> Outdoors						
Weather Conditions		<input type="checkbox"/> Sunny		<input checked="" type="checkbox"/> Clear		<input type="checkbox"/> Cloudy		<input type="checkbox"/> Rain <input type="checkbox"/> Snow		
Surface Conditions:		<input checked="" type="checkbox"/> Flat		<input type="checkbox"/> Incline		<input type="checkbox"/> Decline		<input type="checkbox"/> Wet <input checked="" type="checkbox"/> Dry		
		<input type="checkbox"/> Ice/Snow		<input type="checkbox"/> Debris		<input type="checkbox"/> No Debris		<input type="checkbox"/> Other		
This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.										
Signature of reporting officer:				Reviewed by:				Date:		
				SGT. R. P. [Signature]				6/23/17		





# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009687	Officer Martens, Alexander	Date: 6/22/2017	Time: 2333	Day: Thursday
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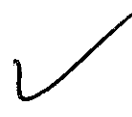
**OIC Comment/Review:**

I spoke with Officer Martens about this incident the night it occurred. I have also reviewed the Response to Resistance Report and all reports associated with this incident and found that the use of force was appropriate under the circumstances and within departmental SOP's.

Sgt. R. Brown 2-6  
Sgt. Brown *(Signature)*



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009407    Officer: Martens, Alexander    Date: 6/19/2017    Time: 0238    Day: Monday

Attached Reports: (Check All That Apply)

Incident Report       Arrest Report       Booking Photo

Was an arrest made?      Suspect Name:      OIC at time of Incident:

Yes     No      Grant, Shawn      Lt. Aldenberg

Suspect Information - CHECK ALL THAT APPLY

Armed with a deadly weapon       Armed with a non-deadly weapon  
 Not armed       Had been drinking  
 Impaired or Intoxicated       Under the influence of drugs  
 Agitated prior to police arrival       Any disability (describe):  
 Language barrier (if so, language spoken)

Type of Force Used - CHECK ALL THAT APPLY

<p><u>Soft Hand Control</u></p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control	<p><u>Hard Hand Control</u></p> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input type="checkbox"/> Take Down <input checked="" type="checkbox"/> Other (describe) Closed hand strike	<p><u>Firearm</u></p> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Shotgun Used <input type="checkbox"/> Gas Deployment- OC/CS
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Secondary Weapon System

 OC  
 Baton  
 K-9  
 Other (describe)  
 Taser

Injury Information

Were any injuries sustained to officer?       Yes     No      If yes, describe below...

left arm contaminated with suspects blood- suspect flagged for communicable disease

Were any injuries sustained to suspect?       Yes     No      If yes, describe below...

Cuts to hands from falling

Was medical attention provided?       Yes     No      If yes, describe below...

Subject was uncooperative

Describe the effects of the force used on any persons involved, and any decontamination method used if any....

Strike was effective in gaining control of he subject

Officer Information

# of officers present 2      # of officers injured: 1

Officer description:       Uniform       Plain Clothes

Duty Status:       On Duty       Off Duty       On Duty Detail/Location

Route/Assignment:

Verbal Commands used Before       Verbal Commands Used During       Verbal Commands Used After

Miscellaneous Information

Offense/Charge:

Lighting:       Daylight       Artificial       Low Light       Darkness

Location:       Indoors       Outdoors

Weather Conditions       Sunny       Clear       Cloudy       Rain       Snow

Surface Conditions:       Flat       Incline       Decline       Wet       Dry

Ice/Snow       Debris       No Debris       Other

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Signature of reporting officer: *[Signature]*      Reviewed by: *[Signature]*      Date: 6/19/17

*[Handwritten initials]*



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009407	Officer Martens, Alexander	Date: 6/19/2017	Time: 0238	Day: Monday
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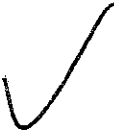
**OIC Comment/Review:**

I spoke with Officer Martens about this incident the night it occurred. I have also reviewed the Response to Resistance Report and all reports associated with this incident and found that the use of force was appropriate under the circumstances and within departmental SOP's.

*Alden* *(C-8)*  
\_\_\_\_\_  
Lt. Aldenberg *SM (CS)*



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009365	Officer: Rahill, Max E	Date: 6/18/2017	Time: 0710	Day: Sunday
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Attached Reports: (Check All That Apply)

Incident Report     
  Arrest Report     
  Booking Photo

Was an arrest made? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Suspect Name: Fernandez, Margarita	OIC at time of Incident: Sgt Bellenoit
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**Suspect Information - CHECK ALL THAT APPLY**

<input type="checkbox"/> Armed with a deadly weapon	<input type="checkbox"/> Armed with a non-deadly weapon
<input type="checkbox"/> Not armed	<input type="checkbox"/> Had been drinking
<input type="checkbox"/> Impaired or Intoxicated	<input type="checkbox"/> Under the influence of drugs
<input checked="" type="checkbox"/> Agitated prior to police arrival	<input type="checkbox"/> Any disability (describe):
<input type="checkbox"/> Language barrier (if so, language spoken)	

**Type of Force Used - CHECK ALL THAT APPLY**

<b>Soft Hand Control</b> <input type="checkbox"/> Joint Manipulation <input checked="" type="checkbox"/> Pressure Point Control	<b>Hard Hand Control</b> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input checked="" type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<b>Firearm</b> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used	<input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Gas Deployment- OC/CS
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**Secondary Weapon System**

OC  
 Baton  
 K-9  
 Other (describe)  
 Taser

**Injury Information**

Were any injuries sustained to officer?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, describe below...
Were any injuries sustained to suspect?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, describe below...
Was medical attention provided?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, describe below...

Describe the effects of the force used on any persons involved, and any decontamination method used if any....  
 MARGARITA had to be transitioned to the bed after pulling away from officers. Pressure point was used to gain pain compliance

**Officer Information**

# of officers present 3      # of officers injured: 0

Officer description:     Uniform     Plain Clothes

Duty Status:             On Duty         Off Duty         On Duty Detail/Location

Route/Assignment: 2-2

Verbal Commands used Before     
  Verbal Commands Used During     
  Verbal Commands Used After

**Miscellaneous Information**

Offense/Charge: NH RSA 642:2 Resisting Arrest

Lighting:             Daylight     Artificial     Low Light     Darkness

Location:             Indoors      Outdoors

Weather Conditions:  Sunny         Clear         Cloudy         Rain         Snow

Surface Conditions:  Flat          Incline      Decline      Wet          Dry

Ice/Snow     Debris       No Debris     Other

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Signature of reporting officer:	Reviewed by:	Date: 6/22/2017
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# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009365	Officer Rahill, Max E	Date: 6/18/2017	Time: 0710	Day: Sunday
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**OIC Comment/Review:**

I reviewed Officer Rahill's Response to Resistance Form, his incident report, and I have also spoken to him referencne this arrest. Based on this information I conclude that Officer Rahill's application of a Pressure Point (pain compliance technique) was justified and was the appropriate amount of force needed. - Sgt. R. Bellenoit Z22

  
Sgt Bellenoit 



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009351    Officer: Roscoe Jr, Michael J    Date: 6/18/2017    Time: 0048    Day: Sunday

Attached Reports: (Check All That Apply)

Incident Report       Arrest Report       Booking Photo

Was an arrest made?      Suspect Name:      OIC at time of Incident:

Yes     No      ERDLEN, MATTHEW [REDACTED]      Lt. Aldenberg

Suspect Information: CHECK ALL THAT APPLY

Armed with a deadly weapon       Armed with a non-deadly weapon  
 Not armed       Had been drinking  
 Impaired or Intoxicated       Under the influence of drugs  
 Agitated prior to police arrival       Any disability (describe):  
 Language barrier (if so, language spoken)

Type of Force Used: CHECK ALL THAT APPLY

<p><b>Soft Hand Control</b></p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control	<p><b>Hard Hand Control</b></p> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input checked="" type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p><b>Firearm</b></p> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used	<input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Gas Deployment- OC/CS
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**Secondary Weapon System**

 OC  
 Baton  
 K-9  
 Other (describe)  
 Taser

Injury Information

Were any injuries sustained to officer?     Yes     No    If yes, describe below...

Were any injuries sustained to suspect?     Yes     No    If yes, describe below...

Small cut to left cheek with blood present, swelling to left eye.

Was medical attention provided?     Yes     No    If yes, describe below...

AMR responded to booking area and covered small cut to suspect's face with band-aid. Suspect refused further treatment.

Describe the effects of the force used on any persons involved, and any decontamination method used if any...

Subject resisted on scene and remained uncooperative in booking, quickly turned and walked away from booking window stating "You can't control me". Subject was tripped to the ground and handcuffed prone.

Officer Information

# of officers present: 1      # of officers injured: 0

Officer description:     Uniform     Plain Clothes

Duty Status:     On Duty     Off Duty     On Duty Detail/Location

Route/Assignment: 1-4 Midnights

Verbal Commands used Before     Verbal Commands Used During     Verbal Commands Used After

Miscellaneous Information

Offense/Charge: Resisting Arrest/Detention; Disorderly Conduct

Lighting:     Daylight     Artificial     Low Light     Darkness

Location:     Indoors     Outdoors

Weather Conditions:     Sunny     Clear     Cloudy     Rain     Snow

Surface Conditions:     Flat     Incline     Decline     Wet     Dry

Ice/Snow     Debris     No Debris     Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.

Signature of reporting officer: *[Signature]*    Reviewed by: *[Signature]*    Date: 6/18/17





# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009351	Officer Roscoe Jr, Michael J	Date: 6/18/2017	Time: 0048	Day: Sunday
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### OIC Comment/Review:

I reviewed Officer Roscoe's Response to Resistance Form and his incident report, and I have also spoken to him regarding this arrest. I also reviewed the video from booking. Based on this information I conclude that Officer Roscoe's application of a Hard Hand Control (take down technique) was justified and was the appropriate amount of force needed in order to safely and properly control the subject. Immediately following the incident Officer Roscoe ensured that the subject received the appropriate medical attention. I was immediately notified of the incident and responded to booking. While in the booking area I observed that the subject continued to be verbally disrespectful and made statements centered around that we could not control what he did or how he acts while he was in the booking area.

ALDENBERG C-E  
Lt. Aldenberg ALDENBERG





# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-6587	Officer: Joyal, Eric M	Date: 5/4/2017	Time: 0030	Day: Thursday
Attached Reports: (Check All That Apply)				
<input checked="" type="checkbox"/> Incident Report		<input checked="" type="checkbox"/> Arrest Report		<input checked="" type="checkbox"/> Booking Photo
Was an arrest made? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Suspect Name: Orme, Jon [REDACTED]	OIC at time of Incident: Sgt. Brennan		
Suspect Information: CHECK ALL THAT APPLY				
<input type="checkbox"/> Armed with a deadly weapon	<input type="checkbox"/> Armed with a non-deadly weapon			
<input type="checkbox"/> Not armed	<input type="checkbox"/> Had been drinking			
<input type="checkbox"/> Impaired or Intoxicated	<input type="checkbox"/> Under the influence of drugs			
<input type="checkbox"/> Agitated prior to police arrival	<input type="checkbox"/> Any disability (describe):			
<input type="checkbox"/> Language barrier (if so, language spoken)				
Type of Force Used: CHECK ALL THAT APPLY				
<b>Soft Hand Control</b>	<b>Hard Hand Control</b>	<b>Firearm</b>		
<input type="checkbox"/> Joint Manipulation	<input type="checkbox"/> Open Hand Strike	<input type="checkbox"/> Handgun Deployed	<input type="checkbox"/> Less Lethal- 12 Ga- Deployed	
<input type="checkbox"/> Pressure Point Control	<input type="checkbox"/> Kick	<input type="checkbox"/> Handgun Used	<input type="checkbox"/> Less Lethal- 12 Ga- Used	
<b>Secondary Weapon System</b>	<input type="checkbox"/> Knee Strike	<input type="checkbox"/> Rifle Deployed	<input type="checkbox"/> Less Lethal- 40 mm- Deployed	
<input type="checkbox"/> OC	<input type="checkbox"/> Take Down	<input type="checkbox"/> Rifle Used	<input type="checkbox"/> Less Lethal- 40 mm- Used	
<input type="checkbox"/> Baton	<input type="checkbox"/> Other (describe)	<input type="checkbox"/> Shotgun Deployed	<input checked="" type="checkbox"/> Noise Flash Device	
<input type="checkbox"/> K-9		<input type="checkbox"/> Shotgun Used	<input type="checkbox"/> Gas Deployment- OC/CS	
<input type="checkbox"/> Other (describe)				
<input type="checkbox"/> Taser				
Injury Information				
Were any injuries sustained to officer?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, describe below...		
Were any injuries sustained to suspect?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, describe below...		
Was medical attention provided?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, describe below...		
Describe the effects of the force used on any persons involved, and any decontamination method used if any.... Deployed NFD as a distraction device at secondary entry door.				
Officer Information:				
# of officers present <u>10</u>	# of officers injured: <u>0</u>			
Officer description:	<input checked="" type="checkbox"/> Uniform	<input type="checkbox"/> Plain Clothes		
Duty Status:	<input type="checkbox"/> On Duty	<input type="checkbox"/> Off Duty	<input type="checkbox"/> On Duty Detail/Location	
Route/Assignment: SWAT				
<input checked="" type="checkbox"/> Verbal Commands used Before	<input checked="" type="checkbox"/> Verbal Commands Used During	<input checked="" type="checkbox"/> Verbal Commands Used After		
Miscellaneous Information:				
Offense/Charge: Poss of a Controlled Drug, Felon in Possession of a Firearm				
Lighting:	<input type="checkbox"/> Daylight	<input checked="" type="checkbox"/> Artificial	<input type="checkbox"/> Low Light	<input type="checkbox"/> Darkness
Location:	<input checked="" type="checkbox"/> Indoors	<input type="checkbox"/> Outdoors		
Weather Conditions	<input type="checkbox"/> Sunny	<input type="checkbox"/> Clear	<input type="checkbox"/> Cloudy	<input type="checkbox"/> Rain <input type="checkbox"/> Snow
Surface Conditions:	<input checked="" type="checkbox"/> Flat	<input type="checkbox"/> Incline	<input type="checkbox"/> Decline	<input type="checkbox"/> Wet <input type="checkbox"/> Dry
	<input type="checkbox"/> Ice/Snow	<input type="checkbox"/> Debris	<input checked="" type="checkbox"/> No Debris	<input type="checkbox"/> Other
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Signature of reporting officer: <i>[Signature]</i>		Reviewed by: <i>Richard W Brennan</i>		Date: <u>5/16/17</u>



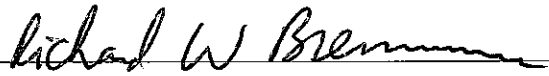

# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-6587	Officer Joyal, Eric M	Date: 5/4/2017	Time: 0030	Day: Thursday
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### OIC Comment/Review:

Upon reviewing Officers reports, Officers statements, reviewing Operation Order and department policies and procedures, the use of force is within reasonable grounds. The deployment of the Noise flash device follows department policy and procedures. RWB Z-13

  
Sgt. Brennan  




# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009300    Officer Connors, John P    Date: 6/17/2017    Time: 0230    Day: Saturday

Attached Reports: (Check All That Apply)

Incident Report     Arrest Report     Booking Photo

Was an arrest made?  Yes     No    Suspect Name: Pena, Davie    OIC at time of Incident: Cabwell

Suspect Information: CHECK ALL THAT APPLY

Armed with a deadly weapon     Armed with a non-deadly weapon  
 Not armed     Had been drinking  
 Impaired or Intoxicated     Under the influence of drugs  
 Agitated prior to police arrival     Any disability (describe):  
 Language barrier (if so, language spoken)

Type of Force Used: CHECK ALL THAT APPLY

<p><u>Soft Hand Control</u></p> <input checked="" type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control  <p><u>Secondary Weapon System</u></p> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input type="checkbox"/> Taser	<p><u>Hard Hand Control</u></p> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p><u>Firearm</u></p> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used	<input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Gas Deployment- OC/CS
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Injury Information:

Were any injuries sustained to officer?     Yes     No    If yes, describe below...

Were any injuries sustained to suspect?     Yes     No    If yes, describe below...

Was medical attention provided?     Yes     No    If yes, describe below...

Describe the effects of the force used on any persons involved, and any decontamination method used if any....  
Pena was taken to the ground by soft hand controls

Officer Information:

# of officers present 0    # of officers injured: 0

Officer description:  Uniform     Plain Clothes

Duty Status:  On Duty     Off Duty     On Duty Detail/Location

Route/Assignment:  
 Verbal Commands used Before     Verbal Commands Used During     Verbal Commands Used After

Miscellaneous Information:

Offense/Charge: DOC/Resisting Arrest or Detention

Lighting:     Daylight     Artificial     Low Light     Darkness

Location:     Indoors     Outdoors

Weather Conditions:     Sunny     Clear     Cloudy     Rain     Snow

Surface Conditions:     Flat     Incline     Decline     Wet     Dry  
 Ice/Snow     Debris     No Debris     Other

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Signature of reporting officer: *[Handwritten Signature]* # 129    Reviewed by:    Date: 6/17/17

A2



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009300	Officer Connors, John P	Date: 6/17/2017	Time: 0230	Day: Saturday
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**OIC Comment/Review:**

I have reviewed Off. J. Connors report and spoken to him reference this incident. I believe Off. J. Connors acted in accordance with MPD Standard Operating Procedures. - Sgt. B. Caldwell Z16

*B. Caldwell Z16*  
*JWC*



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009001	Officer: Marr, Peter A	Date: 6/14/2017	Time: 1030	Day: Wednesday
Attached Reports: (Check All That Apply)				
<input checked="" type="checkbox"/> Incident Report		<input checked="" type="checkbox"/> Arrest Report		<input checked="" type="checkbox"/> Booking Photo
Was an arrest made? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Suspect Name: Griffin, Brandon		OIC at time of Incident: Lt. Aldenburg	
Suspect Information: CHECK ALL THAT APPLY				
<input type="checkbox"/> Armed with a deadly weapon		<input type="checkbox"/> Armed with a non-deadly weapon		
<input checked="" type="checkbox"/> Not armed		<input type="checkbox"/> Had been drinking		
<input type="checkbox"/> Impaired or Intoxicated		<input type="checkbox"/> Under the influence of drugs		
<input type="checkbox"/> Agitated prior to police arrival		<input type="checkbox"/> Any disability (describe):		
<input type="checkbox"/> Language barrier (if so, language spoken)				
Type of Force Used: CHECK ALL THAT APPLY				
<u>Soft Hand Control</u>		<u>Hard Hand Control</u>		<u>Firearm</u>
<input type="checkbox"/> Joint Manipulation		<input type="checkbox"/> Open Hand Strike		<input type="checkbox"/> Handgun Deployed
<input type="checkbox"/> Pressure Point Control		<input type="checkbox"/> Kick		<input type="checkbox"/> Handgun Used
		<input type="checkbox"/> Knee Strike		<input type="checkbox"/> Rifle Deployed
<u>Secondary Weapon System</u>		<input type="checkbox"/> Take Down		<input type="checkbox"/> Rifle Used
<input type="checkbox"/> OC		<input type="checkbox"/> Other (describe)		<input type="checkbox"/> Shotgun Deployed
<input type="checkbox"/> Baton				<input checked="" type="checkbox"/> Noise Flash Device
<input type="checkbox"/> K-9				<input type="checkbox"/> Gas Deployment- OC/CS
<input type="checkbox"/> Other (describe)				
<input type="checkbox"/> Taser				
Injury Information:				
Were any injuries sustained to officer?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, describe below...
Were any injuries sustained to suspect?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, describe below...
Was medical attention provided?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, describe below...
Describe the effects of the force used on any persons involved, and any decontamination method used if any.... The NFD used created a loud noise diversion that disoriented the suspect				
Officer Information:				
# of officers present: 8		# of officers injured: 0		
Officer description:		<input checked="" type="checkbox"/> Uniform		<input type="checkbox"/> Plain Clothes
Duty Status:		<input checked="" type="checkbox"/> On Duty		<input type="checkbox"/> Off Duty <input type="checkbox"/> On Duty Detail/Location
Route/Assignment: SWAT				
<input type="checkbox"/> Verbal Commands used Before		<input type="checkbox"/> Verbal Commands Used During		<input checked="" type="checkbox"/> Verbal Commands Used After
Miscellaneous Information:				
Offense/Charge: Warrant service for sales				
Lighting:		<input checked="" type="checkbox"/> Daylight		<input type="checkbox"/> Artificial <input type="checkbox"/> Low Light <input type="checkbox"/> Darkness
Location:		<input checked="" type="checkbox"/> Indoors		<input type="checkbox"/> Outdoors
Weather Conditions:		<input checked="" type="checkbox"/> Sunny		<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Snow
Surface Conditions:		<input checked="" type="checkbox"/> Flat		<input type="checkbox"/> Incline <input type="checkbox"/> Decline <input type="checkbox"/> Wet <input type="checkbox"/> Dry
		<input type="checkbox"/> Ice/Snow		<input type="checkbox"/> Debris <input type="checkbox"/> No Debris <input type="checkbox"/> Other
This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.				
Signature of reporting officer: <i>John Marr</i> 2-23		Reviewed by: <i>[Signature]</i> (L-8)		Date: 6-15-17



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-009001	Officer: Marr, Peter A	Date: 6/14/2017	Time: 1030	Day: Wednesday
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**OIC Comment/Review:**

I had the opportunity to review all reports associated with this incident as well as the SWAT Operations Plan. The utilization of a Noise-Flash Device was appropriate, especially given the fact that at the time the suspect in this incident was potentially armed with a handgun. The NFD had the desired outcome and allowed for the suspects to be taken into custody without incident.

P. Aldenberg (C-8)  
Lt. Aldenberg SML (CS)



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008944	Officer Martens, Alexander	Date: 6/12/2017	Time: 0143	Day: Monday
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Attached Reports: (Check All That Apply)

Incident Report     
  Arrest Report     
  Booking Photo

Was an arrest made? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Suspect Name: Frascona, Paul	OIC at time of Incident: LT Aldenberg
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Suspect Information: CHECK ALL THAT APPLY

<input type="checkbox"/> Armed with a deadly weapon	<input type="checkbox"/> Armed with a non-deadly weapon
<input checked="" type="checkbox"/> Not armed	<input checked="" type="checkbox"/> Had been drinking
<input checked="" type="checkbox"/> Impaired or Intoxicated	<input type="checkbox"/> Under the influence of drugs
<input checked="" type="checkbox"/> Agitated prior to police arrival	<input type="checkbox"/> Any disability (describe):
<input type="checkbox"/> Language barrier (if so, language spoken)	

Type of Force Used: CHECK ALL THAT APPLY

<p><b>Soft Hand Control</b></p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control  <p><b>Secondary Weapon System</b></p> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input checked="" type="checkbox"/> Taser	<p><b>Hard Hand Control</b></p> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p><b>Firearm</b></p> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used  <input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Gas Deployment- OC/CS
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Injury Information:

Were any injuries sustained to officer?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If yes, describe below...
Were any injuries sustained to suspect?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If yes, describe below...
Was medical attention provided?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If yes, describe below...

Subject stated he was fine

Describe the effects of the force used on any persons involved, and any decontamination method used if any....  
 Minimal effect darts got caught in subject sweat shirt

Officer Information:

# of officers present 2      # of officers injured: 0

Officer description:     Uniform       Plain Clothes

Duty Status:             On Duty       Off Duty       On Duty Detail/Location

Route/Assignment:

Verbal Commands used Before   
 Verbal Commands Used During   
 Verbal Commands Used After

Miscellaneous Information:

Offense/Charge:

Lighting:             Daylight       Artificial       Low Light       Darkness

Location:             Indoors       Outdoors

Weather Conditions     Sunny       Clear       Cloudy       Rain       Snow

Surface Conditions:     Flat       Incline       Decline       Wet       Dry

Ice/Snow       Debris       No Debris       Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.

Signature of reporting officer: <i>[Signature]</i> #29	Reviewed by: <i>[Signature]</i> C-8	Date: 12 June 16
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A2



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008944	Officer Martens, Alexander	Date: 6/12/2017	Time: 0143	Day: Monday
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### OIC Comment/Review:

I have reviewed Officer Martens Response to Resistance Form as well as his incident report. Based off the information presented to me I conclude that Officer Martens use of force that being the utilization of his Taser was justified.

Phil A. C-B  
LT Aldenberg *SW/CS*





# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008825	Officer: Callahan, Lisa S	Date: 6/9/2017	Time: 2000	Day: Friday
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Attached Reports: (Check All That Apply)

Incident Report     
  Arrest Report     
  Booking Photo

Was an arrest made? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Suspect Name: Eric Sleeper	OIC at time of Incident: Lt Gallant
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**Suspect Information - CHECK ALL THAT APPLY**

<input type="checkbox"/> Armed with a deadly weapon	<input type="checkbox"/> Armed with a non-deadly weapon
<input checked="" type="checkbox"/> Not armed	<input checked="" type="checkbox"/> Had been drinking
<input checked="" type="checkbox"/> Impaired or Intoxicated	<input type="checkbox"/> Under the influence of drugs
<input checked="" type="checkbox"/> Agitated prior to police arrival	<input type="checkbox"/> Any disability (describe):
<input type="checkbox"/> Language barrier (if so, language spoken)	

**Type of Force Used - CHECK ALL THAT APPLY**

<b>Soft Hand Control</b> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control  <b>Secondary Weapon System</b> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input checked="" type="checkbox"/> Taser	<b>Hard Hand Control</b> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input type="checkbox"/> Take Down <input checked="" type="checkbox"/> Other (describe) wrist control	<b>Firearm</b> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used  <input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Gas Deployment- OC/CS
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**Injury Information**

Were any injuries sustained to officer?     Yes     No    If yes, describe below...

Were any injuries sustained to suspect?     Yes     No    If yes, describe below...

Minor abrasions and lacerations which it is unknown whether it was caused by the motor vehicle accident, or the struggle with Officers

Was medical attention provided?     Yes     No    If yes, describe below...

AMR responded to the scene and accessed Sleeper. AMR also bandaged Sleepers abrasions and lacerations.

Describe the effects of the force used on any persons involved, and any decontamination method used if any....

Sleeper was actively resisting arrest, and was grabbing at my hands trying to force himself free from my grip while trying to assault me. Sleeper took a fighting stance with me and refused to follow my verbal commands. Sleeper was tased twice.

**Officer Information**

# of officers present 2      # of officers injured: 0

Officer description:     Uniform     Plain Clothes

Duty Status:     On Duty     Off Duty     On Duty Detail/Location

Route/Assignment: 1-1  
 Verbal Commands used Before   
  Verbal Commands Used During   
  Verbal Commands Used After

**Miscellaneous Information**

Offense/Charge:

Lighting:     Daylight     Artificial     Low Light     Darkness

Location:     Indoors     Outdoors

Weather Conditions:     Sunny     Clear     Cloudy     Rain     Snow

Surface Conditions:     Flat     Incline     Decline     Wet     Dry

Ice/Snow   
  Debris   
  No Debris   
  Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.

Signature of reporting officer: <i>Lisa Callahan 92</i>	Reviewed by: <i>[Signature]</i>	Date: 6/13/17
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# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT





Case # 17-008825	Officer Callahan, Lisa S	Date: 6/9/2017	Time: 2000	Day: Friday
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**OIC Comment/Review:**

I have reviewed the reports associated with this CFS and have spoken with Off. Callahan. I find Off. Callahan acted appropriately and in accordance with the standard operating procedures of the Manchester Police Department.

Lt. Jamie Gallant

  
\_\_\_\_\_  
Lt Gallant  




# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-8604    Officer: Sanders, Christopher M    Date: 6/6/2017    Time: 1902    Day: Tuesday

Attached Reports: (Check All That Apply)

Incident Report                       Arrest Report                       Booking Photo

Was an arrest made?                      Suspect Name:                      OIC at time of Incident:  
 Yes     No                      Steven Vielguth                      Lt Gallant

Suspect Information CHECK ALL THAT APPLY

<input type="checkbox"/> Armed with a deadly weapon	<input type="checkbox"/> Armed with a non-deadly weapon
<input checked="" type="checkbox"/> Not armed	<input type="checkbox"/> Had been drinking
<input type="checkbox"/> Impaired or Intoxicated	<input type="checkbox"/> Under the influence of drugs
<input type="checkbox"/> Agitated prior to police arrival	<input type="checkbox"/> Any disability (describe):
<input type="checkbox"/> Language barrier (if so, language spoken)	

Type of Force Used CHECK ALL THAT APPLY

<p><b>Soft Hand Control</b></p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control <p><b>Secondary Weapon System</b></p> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input type="checkbox"/> Taser	<p><b>Hard Hand Control</b></p> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input checked="" type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p><b>Firearm</b></p> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used	<input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Gas Deployment- OC/CS
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Injury Information

Were any injuries sustained to officer?     Yes     No                      If yes, describe below...

Were any injuries sustained to suspect?     Yes     No                      If yes, describe below...  
 Suspect cut the small finger of his left hand attempting to climb a chain link fence

Was medical attention provided?     Yes     No                      If yes, describe below...  
 EMTs responded to headquarters (booking), suspect refused medical attention

Describe the effects of the force used on any persons involved, and any decontamination method used if any....  
 Suspect was transitioned to the ground and then handcuffed.

Officer Information

# of officers present: 2                      # of officers injured: 0

Officer description:     Uniform                       Plain Clothes

Duty Status:     On Duty                       Off Duty                       On Duty Detail/Location

Route/Assignment: SCU  
 Verbal Commands used Before     Verbal Commands Used During     Verbal Commands Used After

Miscellaneous Information

Offense/Charge: Resisting detention / Possession of a controlled drug.

Lighting:     Daylight     Artificial     Low Light     Darkness

Location:     Indoors     Outdoors

Weather Conditions:     Sunny     Clear     Cloudy     Rain     Snow

Surface Conditions:     Flat     Incline     Decline     Wet     Dry

Ice/Snow     Debris     No Debris     Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.

Signature of reporting officer:                      Reviewed by:                      Date: 6/7/17

(A-2)



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT

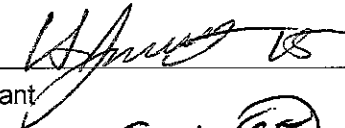



Case # 17-8604	Officer Sanders, Christopher M	Date: 6/6/2017	Time: 1902	Day: Tuesday
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**OIC Comment/Review:**

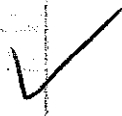
I have spoken to Sergeant Sanders and reviewed the reports for this CFS. I believe appropriate force was used by Sgt. Sanders in accordance with the Manchester Police Department policies and procedures.

Lt Jamie Gallant

  
Lt Gallant  




# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008583    Officer: Meneide, Schleiden P    Date: 6/6/2017    Time: 1304    Day: Tuesday

Attached Reports: (Check All That Apply)

Incident Report                       Arrest Report                       Booking Photo

Was an arrest made?                      Suspect Name:                      OIC at time of Incident:  
 Yes     No                      Ryan Gregoire                      Lt. Mucci

Suspect Information: CHECK ALL THAT APPLY

<input type="checkbox"/> Armed with a deadly weapon	<input type="checkbox"/> Armed with a non-deadly weapon
<input checked="" type="checkbox"/> Not armed	<input type="checkbox"/> Had been drinking
<input checked="" type="checkbox"/> Impaired or Intoxicated	<input checked="" type="checkbox"/> Under the influence of drugs
<input checked="" type="checkbox"/> Agitated prior to police arrival	<input type="checkbox"/> Any disability (describe):
<input type="checkbox"/> Language barrier (if so, language spoken)	

Type of Force Used: CHECK ALL THAT APPLY

<p><b>Soft Hand Control</b></p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control <p><b>Secondary Weapon System</b></p> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input checked="" type="checkbox"/> Other (describe) <u>Flashlight</u> <input type="checkbox"/> Taser	<p><b>Hard Hand Control</b></p> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p><b>Firearm</b></p> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used	<input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Gas Deployment- OC/CS
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Injury Information:

Were any injuries sustained to officer?     Yes     No                      If yes, describe below...

Were any injuries sustained to suspect?     Yes     No                      If yes, describe below...

Was medical attention provided?     Yes     No                      If yes, describe below...

Describe the effects of the force used on any persons involved, and any decontamination method used if any...

Used flashlight to break driver's side window of NH veteran plate V48261, no injury to suspect, executed to control hands after ignoring verbal commands

Officer Information:

# of officers present: 1                      # of officers injured: 0

Officer description:     Uniform                       Plain Clothes

Duty Status:                       On Duty                       Off Duty                       On Duty Detail/Location

Route/Assignment:  
 Verbal Commands used Before     Verbal Commands Used During     Verbal Commands Used After

Miscellaneous Information:

Offense/Charge: Resisting Arrest or Detention, Unauthorized Use of Propelled Vehicle, Driving After Suspension 2nd, Driving Under Influence

Lighting:                       Daylight                       Artificial                       Low Light                       Darkness

Location:                       Indoors                       Outdoors

Weather Conditions     Sunny                       Clear                       Cloudy                       Rain                       Snow

Surface Conditions:     Flat                       Incline                       Decline                       Wet                       Dry

Ice/Snow                       Debris                       No Debris                       Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.

Signature of reporting officer: [Signature]                      Reviewed by: [Signature]                      Date: 6/7/2017

MPD FORM 128



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008583	Officer: Meneide, Schleiden P	Date: 6/6/2017	Time: 1304	Day: Tuesday
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**OIC Comment/Review:**

I have reviewed Officer Meneide's Response to Resistance Form as well as his incident report. Based off the information presented to me I conclude that Officer Meneide's use of force in breaching the window was justified.

Joseph J. Mucci  
Lt. Mucci  
06-08-17  
S.W.L. (5)



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008455    Officer: McGee, Michael J    Date: 6/4/2017    Time: 0135    Day: Sunday

Attached Reports: (Check All That Apply)

Incident Report       Arrest Report       Booking Photo

Was an arrest made?      Suspect Name:      OIC at time of Incident:

Yes     No      Joao Silveria [REDACTED]      R. Brown

**Suspect Information: CHECK ALL THAT APPLY**

<input type="checkbox"/> Armed with a deadly weapon	<input type="checkbox"/> Armed with a non-deadly weapon
<input checked="" type="checkbox"/> Not armed	<input checked="" type="checkbox"/> Had been drinking
<input checked="" type="checkbox"/> Impaired or Intoxicated	<input type="checkbox"/> Under the influence of drugs
<input checked="" type="checkbox"/> Agitated prior to police arrival	<input type="checkbox"/> Any disability (describe):
<input type="checkbox"/> Language barrier (if so, language spoken)	

**Type of Force Used: CHECK ALL THAT APPLY**

<p><b>Soft Hand Control</b></p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control  <p><b>Secondary Weapon System</b></p> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input type="checkbox"/> Taser	<p><b>Hard Hand Control</b></p> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input checked="" type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p><b>Firearm</b></p> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Shotgun Used <input type="checkbox"/> Gas Deployment- OC/CS
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**Injury Information**

Were any injuries sustained to officer?     Yes     No      If yes, describe below...

Were any injuries sustained to suspect?     Yes     No      If yes, describe below...

Silveria sustained minor roadrash on his right hand and face.

Was medical attention provided?           Yes     No      If yes, describe below...

Subject refused any and all medical attention.

Describe the effects of the force used on any persons involved, and any decontamination method used if any....

Subject pushed myself and physically resisted where he was then taken to the ground.

**Officer Information**

# of officers present: 3      # of officers injured: 0

Officer description:     Uniform       Plain Clothes

Duty Status:             On Duty       Off Duty       On Duty Detail/Location

Route/Assignment:

Verbal Commands used Before       Verbal Commands Used During       Verbal Commands Used After

**Miscellaneous Information**

Offense/Charge:

Lighting:                 Daylight       Artificial       Low Light       Darkness

Location:                 Indoors       Outdoors

Weather Conditions     Sunny         Clear           Cloudy         Rain             Snow

Surface Conditions:     Flat             Incline         Decline         Wet             Dry

Ice/Snow       Debris         No Debris       Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.

Signature of reporting officer: *[Signature]*      Reviewed by: *Det. R. Brown 2-6*      Date: *6/4/17*

A-2



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008455	Officer McGee, Michael J	Date: 6/4/2017	Time: 0135	Day: Sunday
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### OIC Comment/Review:

I spoke with Officer McGee about this incident the night it occurred. I have also reviewed the Response to Resistance Report and all reports associated with this incident and found that the use of force was appropriate under the circumstances and within departmental SOP's.

*SGT. R. Brown 26*

R. Brown

*SMC CS*





# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008493    Officer: Finn, Casey    Date: 6/4/2017    Time: 2115    Day: Sunday

Attached Reports: (Check All That Apply)

Incident Report     Arrest Report     Booking Photo

Was an arrest made?  Yes     No    Suspect Name: Stratton, Scott    OIC at time of Incident: Sgt. Biron

Suspect Information CHECK ALL THAT APPLY

Armed with a deadly weapon     Armed with a non-deadly weapon  
 Not armed     Had been drinking  
 Impaired or Intoxicated     Under the influence of drugs  
 Agitated prior to police arrival     Any disability (describe):  
 Language barrier (if so, language spoken)

Type of Force Used CHECK ALL THAT APPLY

<p><b>Soft Hand Control</b></p> <input type="checkbox"/> Joint Manipulation <input checked="" type="checkbox"/> Pressure Point Control	<p><b>Hard Hand Control</b></p> <input checked="" type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p><b>Firearm</b></p> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used	<input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Gas Deployment- OC/CS
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**Secondary Weapon System**

 OC  
 Baton  
 K-9  
 Other (describe)  
 Taser

Injury Information

Were any injuries sustained to officer?     Yes     No    If yes, describe below...

Were any injuries sustained to suspect?     Yes     No    If yes, describe below...

Was medical attention provided?     Yes     No    If yes, describe below...

Describe the effects of the force used on any persons involved, and any decontamination method used if any...

STRATTON took ahold of my left wrist and then my shirt while he was actively resisting. He then attempted to headbutt and bite my left hand. Mandibular angle was used. STRATTON attempted to headbutt me again and I administered a palm heel strike.

Officer Information

# of officers present: 3    # of officers injured: 0

Officer description:  Uniform     Plain Clothes

Duty Status:  On Duty     Off Duty     On Duty Detail/Location

Route/Assignment: 1-2  
 Verbal Commands used Before     Verbal Commands Used During     Verbal Commands Used After

Miscellaneous Information

Offense/Charge:

Lighting:  Daylight     Artificial     Low Light     Darkness

Location:  Indoors     Outdoors

Weather Conditions:  Sunny     Clear     Cloudy     Rain

Surface Conditions:  Flat     Incline     Decline     Wet     Dry  
 Ice/Snow     Debris     No Debris     Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.

Signature of reporting officer: *[Signature]*    Reviewed by: *[Signature]*    Date: 6/5/17





# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008493	Officer Finn, Casey	Date: 6/4/2017	Time: 2115	Day: Sunday
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**OIC Comment/Review:**

I reviewed the reports associated with this use of force, as well as having spoke with Ofc Finn and I have found that his use of a pressure point control and hard hand strike to counter an attempted assault by the defendant was both reasonable and within policy.

  
\_\_\_\_\_  
Sgt. Biron 



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case #	17-008433	Officer:	McKennedy, Shaun M	Date:	6/3/2017	Time:	1925	Day:	Saturday
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Attached Reports: (Check All That Apply)

Incident Report     
  Arrest Report     
  Booking Photo

Was an arrest made? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Suspect Name: William Beatty [REDACTED]	OIC at time of Incident: Lt. Gallant
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Suspect Information - CHECK ALL THAT APPLY

<input type="checkbox"/> Armed with a deadly weapon	<input type="checkbox"/> Armed with a non-deadly weapon
<input checked="" type="checkbox"/> Not armed	<input type="checkbox"/> Had been drinking
<input type="checkbox"/> Impaired or Intoxicated	<input type="checkbox"/> Under the influence of drugs
<input checked="" type="checkbox"/> Agitated prior to police arrival	<input type="checkbox"/> Any disability (describe):
<input type="checkbox"/> Language barrier (if so, language spoken)	

Type of Force Used - CHECK ALL THAT APPLY

<p><b>Soft Hand Control</b></p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control  <p><b>Secondary Weapon System</b></p> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input type="checkbox"/> Taser	<p><b>Hard Hand Control</b></p> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input checked="" type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p><b>Firearm</b></p> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used  <input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Less Lethal- 40 mm- Used <input type="checkbox"/> Noise Flash Device <input type="checkbox"/> Gas Deployment- OC/CS
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Injury Information

Were any injuries sustained to officer?     Yes     No    If yes, describe below...

Were any injuries sustained to suspect?     Yes     No    If yes, describe below...

Minor scrape/bump on his forehead.

Was medical attention provided?     Yes     No    If yes, describe below...

Brought to Elliot Hospital after headache complaint.

Describe the effects of the force used on any persons involved, and any decontamination method used if any....

It allowed me to gain control of the suspect.

Officer Information

# of officers present: 1      # of officers injured: 0

Officer description:     Uniform     Plain Clothes

Duty Status:     On Duty     Off Duty     On Duty Detail/Location

Route/Assignment: Patrol 2-6C

Verbal Commands used Before     Verbal Commands Used During     Verbal Commands Used After

Miscellaneous Information

Offense/Charge:

Lighting:     Daylight     Artificial     Low Light     Darkness

Location:     Indoors     Outdoors

Weather Conditions     Sunny     Clear     Cloudy     Rain     Snow

Surface Conditions:     Flat     Incline     Decline     Wet     Dry

Ice/Snow     Debris     No Debris     Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.

Signature of reporting officer: <i>[Signature]</i>	Reviewed by: <i>[Signature]</i>	Date: 6/6/17
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# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008433	Officer: McKennedy, Shaun M	Date: 6/3/2017	Time: 1925	Day: Saturday
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**OIC Comment/Review:**

I have spoken to Off. McKennedy, reviewed the reports associated with this cfs and concluded the amount of force used was appropriate.

Lt. Jamie Gallant

Lt. Gallant   
SUCS



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008414    Officer: Roscoe Jr, Michael J    Date: 6/3/2017    Time: 1029    Day: Saturday

Attached Reports: (Check All That Apply)

Incident Report       Arrest Report       Booking Photo

Was an arrest made?      Suspect Name:

Yes     No      KORDAS, JOHN    **OIC: Lt. Mucci**

Suspect Information CHECK ALL THAT APPLY

Armed with a deadly weapon       Armed with a non-deadly weapon  
 Not armed       Had been drinking  
 Impaired or Intoxicated       Under the influence of drugs  
 Agitated prior to police arrival       Any disability (describe):  
 Language barrier (if so, language spoken)

Type of Force Used CHECK ALL THAT APPLY

<p><b>Soft Hand Control</b></p> <p><input type="checkbox"/> Joint Manipulation  <input type="checkbox"/> Pressure Point Control</p> <p><b>Secondary Weapon System</b></p> <p><input type="checkbox"/> OC  <input type="checkbox"/> Baton  <input type="checkbox"/> K-9  <input type="checkbox"/> Other (describe)  <input checked="" type="checkbox"/> Taser</p>	<p><b>Hard Hand Control</b></p> <p><input type="checkbox"/> Open Hand Strike  <input type="checkbox"/> Kick  <input type="checkbox"/> Knee Strike  <input type="checkbox"/> Take Down  <input type="checkbox"/> Other (describe)</p>	<p><b>Firearm</b></p> <p><input type="checkbox"/> Handgun Deployed    <input type="checkbox"/> Less Lethal- 12 Ga- Deployed  <input type="checkbox"/> Handgun Used      <input type="checkbox"/> Less Lethal- 12 Ga- Used  <input type="checkbox"/> Rifle Deployed      <input type="checkbox"/> Less Lethal- 40 mm- Deployed  <input type="checkbox"/> Rifle Used          <input type="checkbox"/> Less Lethal- 40 mm- Used  <input type="checkbox"/> Shotgun Deployed    <input type="checkbox"/> Noise Flash Device  <input type="checkbox"/> Shotgun Used        <input type="checkbox"/> Gas Deployment- OC/CS</p>
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Injury Information

Were any injuries sustained to officer?     Yes     No      If yes, describe below...

Were any injuries sustained to suspect?     Yes     No      If yes, describe below...

Was medical attention provided?           Yes     No      If yes, describe below...

Describe the effects of the force used on any persons involved, and any decontamination method used if any....  
 Used presence of Taser to order subject to the ground, due to large size and aggressive conduct (Simple Assault on Officer).

Officer Information

# of officers present 4      # of officers injured: 0

Officer description:     Uniform       Plain Clothes

Duty Status:           On Duty       Off Duty       On Duty Detail/Location

Route/Assignment: 1-4 dayshift

Verbal Commands used Before     Verbal Commands Used During     Verbal Commands Used After

Miscellaneous Information

Offense/Charge: RSA 631:2-A Simple Assault on Officer; RSA 631:4 Criminal Threatening

Lighting:             Daylight       Artificial       Low Light       Darkness

Location:             Indoors       Outdoors

Weather Conditions     Sunny       Clear       Cloudy       Rain       Snow

Surface Conditions:     Flat           Incline       Decline       Wet           Dry

Ice/Snow       Debris       No Debris       Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.

Signature of reporting officer: *[Signature]*      Reviewed by: *[Signature]*      Date: 6/3/17



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case #	17-008414	Officer	Roscoe Jr, Michael J	Date:	6/3/2017	Time:	1029	Day:	Saturday
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### OIC Comment/Review:

I have reviewed Officer Roscoe's Response to Resistance Report, his initial report and spoke to him in regards to this incident. Based on the information presented to me I conclude that the use of force was justified and within policy.

*Joseph J. Mucci*  
10  
06-04-17  
SML (CS)



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008426    Officer Roscoe Jr, Michael J    Date: 6/3/2017    Time: 1500    Day: Saturday

Attached Reports: (Check All That Apply)

Incident Report       Arrest Report       Booking Photo

Was an arrest made?      Suspect Name:      OIC at time of Incident:

Yes     No      GRAHAM, ROWAN      Lt. Gallant

**Suspect Information: CHECK ALL THAT APPLY**

- |  |   |
|--|---|
| <input type="checkbox"/> Armed with a deadly weapon                | <input type="checkbox"/> Armed with a non-deadly weapon |
| <input checked="" type="checkbox"/> Not armed                      | <input type="checkbox"/> Had been drinking              |
| <input type="checkbox"/> Impaired or Intoxicated                   | <input type="checkbox"/> Under the influence of drugs   |
| <input type="checkbox"/> Agitated prior to police arrival          | <input type="checkbox"/> Any disability (describe):     |
| <input type="checkbox"/> Language barrier (if so, language spoken) |   |

**Type of Force Used: CHECK ALL THAT APPLY**

- |   |   |  |   |
|---|---|--|---|
| <p><b>Soft Hand Control</b></p> <input type="checkbox"/> Joint Manipulation<br><input type="checkbox"/> Pressure Point Control<br><br><p><b>Secondary Weapon System</b></p> <input type="checkbox"/> OC<br><input type="checkbox"/> Baton<br><input type="checkbox"/> K-9<br><input type="checkbox"/> Other (describe)<br><input checked="" type="checkbox"/> Taser | <p><b>Hard Hand Control</b></p> <input type="checkbox"/> Open Hand Strike<br><input type="checkbox"/> Kick<br><input type="checkbox"/> Knee Strike<br><input type="checkbox"/> Take Down<br><input type="checkbox"/> Other (describe) | <p><b>Firearm</b></p> <input type="checkbox"/> Handgun Deployed<br><input type="checkbox"/> Handgun Used<br><input type="checkbox"/> Rifle Deployed<br><input type="checkbox"/> Rifle Used<br><input type="checkbox"/> Shotgun Deployed<br><input type="checkbox"/> Shotgun Used | <input type="checkbox"/> Less Lethal- 12 Ga- Deployed<br><input type="checkbox"/> Less Lethal- 12 Ga- Used<br><input type="checkbox"/> Less Lethal- 40 mm- Deployed<br><input type="checkbox"/> Less Lethal- 40 mm- Used<br><input type="checkbox"/> Noise Flash Device<br><input type="checkbox"/> Gas Deployment- OC/CS |
|---|---|--|---|

**Injury Information:**

Were any injuries sustained to officer?     Yes     No    If yes, describe below...

Were any injuries sustained to suspect?     Yes     No    If yes, describe below...

Abrasion to forehead, cuts on wrists from handcuffs, complaints of neck pain and numbness during booking process.

Was medical attention provided?     Yes     No    If yes, describe below...

Refused EMS on scene, later AMR responded to booking and transported GRAHAM to Elliot

Describe the effects of the force used on any persons involved, and any decontamination method used if any....

Subject managed to reach into front of waistband despite being handcuffed, all while violently twisting and turning body on ground attempting to get away. I used the drive stun on Taser for 1-2 second bursts due to subject being actively aggressive.

**Officer Information:**

# of officers present 2      # of officers injured: 0

Officer description:     Uniform     Plain Clothes

Duty Status:     On Duty     Off Duty     On Duty Detail/Location

Route/Assignment: 1-4 day shift

Verbal Commands used Before     Verbal Commands Used During     Verbal Commands Used After

**Miscellaneous Information:**

Offense/Charge: Poss. Controlled Drug; Resisting Arrest; Criminal Mischief x2

Lighting:     Daylight     Artificial     Low Light     Darkness

Location:     Indoors     Outdoors

Weather Conditions     Sunny     Clear     Cloudy     Rain     Snow

Surface Conditions:     Flat     Incline     Decline     Wet     Dry

Ice/Snow     Debris     No Debris     Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director

Signature of reporting officer: *[Signature]*    Reviewed by: *[Signature]*    Date: 6/3/17

A-2



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT

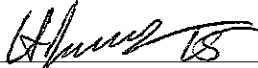


Case # 17-008426	Officer Roscoe Jr, Michael J	Date: 6/3/2017	Time: 1500	Day: Saturday
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**OIC Comment/Review:**

I have reviewed the reports associated with this CFS. Due to the subjects active aggression, his failure to obey commands, and the fact he was reaching for his waistband area, I believe Off. Roscoe's use of force was justified and in accordance with the Manchester Police Departments SOP's.

Lt. Jamie Gallant

  
\_\_\_\_\_  
Lt. Gallant      SW (CS)





# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008288    Officer: Harrington, Mark E    Date: 6/2/2017    Time: 1559    Day: Friday

Attached Reports: (Check All That Apply)

Incident Report     Arrest Report     Booking Photo

Was an arrest made?     Yes     No    Suspect Name: Raikes, Kaisle    OIC at time of Incident: Lt Aldenberg

Suspect Information: CHECK ALL THAT APPLY

Armed with a deadly weapon     Armed with a non-deadly weapon  
 Not armed     Had been drinking  
 Impaired or Intoxicated     Under the influence of drugs  
 Agitated prior to police arrival     Any disability (describe):  
 Language barrier (if so, language spoken)

Type of Force Used: CHECK ALL THAT APPLY

<p><b>Soft Hand Control</b></p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control	<p><b>Hard Hand Control</b></p> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p><b>Firearm</b></p> <input type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used	<input type="checkbox"/> Less Lethal- 12 Ga- Deployed <input type="checkbox"/> Less Lethal- 12 Ga- Used <input type="checkbox"/> Less Lethal- 40 mm- Deployed <input type="checkbox"/> Less Lethal- 40 mm- Used <input checked="" type="checkbox"/> Noise Flash Device <input type="checkbox"/> Gas Deployment- OC/CS
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**Secondary Weapon System**

 OC  
 Baton  
 K-9  
 Other (describe)  
 Taser

Injury Information:

Were any injuries sustained to officer?     Yes     No    If yes, describe below...

Were any injuries sustained to suspect?     Yes     No    If yes, describe below...

Was medical attention provided?     Yes     No    If yes, describe below...

Describe the effects of the force used on any persons involved, and any decontamination method used if any.  
The use of the NFD caused bewilderment and confusion which ultimately led to ease of compliance by the suspects.    OC/CS

Officer Information:

# of officers present: 18    # of officers injured: 0

Officer description:     Uniform     Plain Clothes

Duty Status:     On Duty     Off Duty     On Duty Detail/Location

Route/Assignment: SWAT

Verbal Commands used Before     Verbal Commands Used During     Verbal Commands Used After

Miscellaneous Information:

Offense/Charge:

Lighting:     Daylight     Artificial     Low Light     Darkness

Location:     Indoors     Outdoors

Weather Conditions:     Sunny     Clear     Cloudy     Rain     Snow

Surface Conditions:     Flat     Incline     Decline     Wet     Dry

Ice/Snow     Debris     No Debris     Other

This report is to be filled out after the intentional or unintentional use of force with any weapons or the unintended use of any type of force resulting in injury or death to any person. All reports will be submitted along with the Incident Report, Arrest Report & Booking Photo and forwarded to the Training Director.

Signature of reporting officer: *[Signature]*    Reviewed by: *[Signature]*    Date: 6-6-17

A-2



# MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 17-008288	Officer Harrington, Mark E	Date: 6/2/2017	Time: 1557	Day: Friday
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**OIC Comment/Review:**

I had the opportunity to review all reports associated with this incident as well as the SWAT Operations Plan. The utilization of a Noise-Flash Device was appropriate, especially given the fact that at the time the suspect in this incident was armed with a handgun as we was exiting the apartment immediately after the NFD was used. The NFD had the desired outcome and allowed for the suspect to be taken into custody without incident.

P11201-6-8  
Lt Aldenberg *[Signature]*