



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case #	16-016249	Officer:	Harrington, Mark E	Date:	10/28/2016	Time:	0600	Day:	Friday
Attached Reports: (Check All That Apply)									
<input type="checkbox"/> Incident Report <input type="checkbox"/> Arrest Report <input type="checkbox"/> Booking Photo									
Was an arrest made?			Suspect Name:				OIC at time of Incident:		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Antonio Rivera Alicea				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									
<u>Soft Hand Control</u>			<u>Hard Hand Control</u>			<u>Firearm</u>			
<input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control			<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)			<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 checked="" type="checkbox"/> Noise Flash Device <input type="checkbox"/> Shotgun Used <input type="checkbox"/> Gas Deployment- OC/CS			
<u>Secondary Weapon System</u>									
<input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <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 successful deployment of the NFD was to create confusion and gain compliance.									
Officer Information:									
# of officers present			# of officers injured:						
7			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 type="checkbox"/> Artificial <input checked="" type="checkbox"/> Low Light <input type="checkbox"/> Darkness									
Location: <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors									
Weather Conditions <input type="checkbox"/> Sunny <input type="checkbox"/> Clear <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Snow									
Surface Conditions: <input 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:	
				Richard W Brennan				12/25/16	

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Handwritten initials CS



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-016249	Officer Harrington, Mark E	Date: 10/28/2016	Time: 0600	Day: Friday
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OIC Comment/Review:

Upon reviewing reports, statements and Officers information the use of force is appropriate based upon SOP's, Department Policies and current practices. Z-13 RWB

Richard W Brennan Z-13
Sgt Brennan



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case #	16-016249	Officer:	Beland, Adam R	Date:	10/28/2016	Time:	0600	Day:	Friday		
Attached Reports: (Check All That Apply)											
<input checked="" type="checkbox"/> Incident Report <input type="checkbox"/> Arrest Report <input type="checkbox"/> Booking Photo											
Was an arrest made?		Suspect Name:				OIC at time of Incident:					
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Rivera Alicea, Antonio				Sgt Brennan					
Suspect Information: CHECK ALL THAT APPLY											
<input type="checkbox"/> Armed with a deadly weapon <input type="checkbox"/> Not armed <input type="checkbox"/> Impaired or Intoxicated <input type="checkbox"/> Agitated prior to police arrival <input type="checkbox"/> Language barrier (if so, language spoken)					<input type="checkbox"/> Armed with a non-deadly weapon <input type="checkbox"/> Had been drinking <input type="checkbox"/> Under the influence of drugs <input type="checkbox"/> Any disability (describe):						
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"/> Pressure Point Control			<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)			<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	
<u>Secondary Weapon System</u>											
<input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <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....											
Use of Noise Flash Device effect was within prescribed response. Was deployed on the exterior, no one present inside residence											
Officer Information:											
# of officers present		19		# 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 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:											
Lighting:		<input type="checkbox"/> Daylight <input type="checkbox"/> Artificial <input type="checkbox"/> Low Light <input checked="" type="checkbox"/> Darkness									
Location:		<input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors									
Weather Conditions:		<input type="checkbox"/> Sunny <input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input checked="" type="checkbox"/> Rain <input type="checkbox"/> Snow									
Surface Conditions:		<input type="checkbox"/> Flat <input type="checkbox"/> Incline <input type="checkbox"/> Decline <input checked="" 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:				Reviewed by:				Date:			
								11/17/16			



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-016249	Officer Beland, Adam R	Date: 10/28/2016	Time: 0600	Day: Friday
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OIC Comment/Review:

Upon Reviewing Officer Beland's report and the incident report, the Response to Resistance is within guidelines of Manchester Police Department SOP's, policies and applicable RSA's. Z-13 RWB

Richard W Brennan 2-13

Sgt Brennan



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-016256 Officer Foster, Benjamin C Date: 10/27/2016 Time: 1354 Day: Thursday

Attached Reports: (Check All That Apply)

Incident Report Arrest Report Booking Photo

Was an arrest made?
 Yes No

Suspect Name:

OIC at time of Incident:
Lt Vincent

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

- | | | | |
|--|---|--|---|
| <p>Soft Hand Control</p> <input type="checkbox"/> Joint Manipulation
<input type="checkbox"/> Pressure Point Control | <p>Hard Hand Control</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>Firearm</p> <input checked="" type="checkbox"/> Handgun Deployed
<input checked="" 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 |
|--|---|--|---|
- 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...
 Dispatched the injured deer.

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: 1-1

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: Reviewed by: Date: 10/28/16

1920
CS



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT

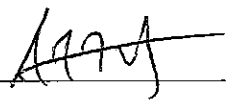


Case # 16-016256	Officer Foster, Benjamin C	Date: 10/27/2016	Time: 1354	Day: Thursday
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OIC Comment/Review:

Officer Foster used an appropriate amount of force to dispatch an injured deer in a humane way with the assistance of ACO Vogler.

No further review necessary.



Lt Vincent



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-16135 Officer: Daly, Kyle R Date: 10/25/2016 Time: 1910 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 McMaster, Nicholas 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 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 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>Soft Hand Control</p> <input type="checkbox"/> Joint Manipulation
<input type="checkbox"/> Pressure Point Control

<p>Secondary Weapon System</p> <input type="checkbox"/> OC
<input type="checkbox"/> Baton
<input type="checkbox"/> K-9
<input checked="" type="checkbox"/> Other (describe) Taser Deployed or
<input type="checkbox"/> Taser | <p>Hard Hand Control</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>Firearm</p> <input checked="" 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 |
|---|--|--|

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...

Transported to the CMC for an Overdose

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

Handgun and Taser were only deployed to clear the secured bathroom. McMaster was brought to the ground by hand after refusing to exit a secured bathroom. Several commands were given for McMaster to show us his hands. Which he did not comply with.

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:

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: 10-26-16



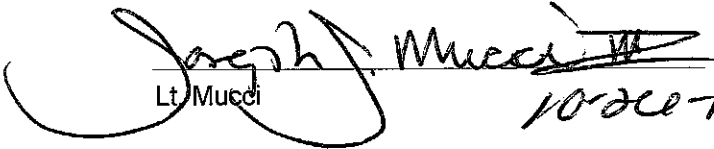
MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-16135	Officer Daly, Kyle R	Date: 10/25/2016	Time: 1910	Day: Tuesday
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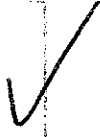
OIC Comment/Review:

I have reviewed Officer Daly's Response to Resistance Report, his UCR 101 and spoke to him in regards to this incident. Based on the information provided to me Officer Daly's use of force was justified and within Manchester Police policy.


Lt. Mucci 10-26-16



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-016035	Officer: MacDuff, Eric S	Date: 10/23/2016	Time: 2331	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: Reed, Steven	OIC at time of Incident: Sgt. Brown
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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>Soft Hand Control</p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control <p>Secondary Weapon System</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>Hard Hand Control</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>Firearm</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...

slight abrasion to side of head caused from falling onto ground while being tased

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

subj refused AMR

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

Use of the taser made the subject submit to the arrest without further incident

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: 	Reviewed by: Sgt. R. P. [Signature]	Date: 10/24/16
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CS *macduff*



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-016035	Officer MacDuff, Eric S	Date: 10/23/2016	Time: 2331	Day: Sunday
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OIC Comment/Review:

I spoke with Officer MacDuff 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

Sgt. Brown



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-15983 Officer Roscoe Jr, Michael J Date: 10/22/2016 Time: 1657 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 Remy Ouellette Sgt. C. Biron

Suspect Information: CHECK ALL THAT APPLY

<input checked="" 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

<p>Soft Hand Control</p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control	<p>Hard Hand Control</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>Firearm</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
<p>Secondary Weapon System</p> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input checked="" type="checkbox"/> 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....
 On arrival, subject was holding a knife and metal shovel. Subject dropped knife but continued holding shovel. I drew my taser, and gave him repeated commands to drop the shovel to which he refused. I then arced my taser and the subject dropped the shovel.

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

Miscellaneous Information:

Offense/Charge: Criminal Threatening (B); 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 On front steps

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: 10/22/16

CS



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-15983	Officer Roscoe Jr, Michael J	Date: 10/22/2016	Time: 1657	Day: Saturday
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OIC Comment/Review:

I spoke with Officer Roscoe and his training officer, Ofc Gillotte as well as reviewing the reports associated with this use of force and found that the deployment of the Taser in warning arc mode was reasonable and within department policy.

Sgt. C. Biron



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015842	Officer: Megowen, Robert G	Date: 10/20/2016	Time: 0912	Day: Thursday
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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: Davis, Joseph	OIC at time of Incident: Sgt. Brennan
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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 type="checkbox"/> Agitated prior to police arrival	<input type="checkbox"/> Any disability (describe):
<input type="checkbox"/> Language barrier (if so, language spoken) Warrant Assessment score 71	

Type of Force Used: CHECK ALL THAT APPLY

Soft Hand Control <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control Secondary Weapon System <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input type="checkbox"/> Taser	Hard Hand Control <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)	Firearm <input checked="" type="checkbox"/> Handgun Deployed <input type="checkbox"/> Handgun Used <input checked="" 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....
 Tactical Team felonly stop condcuted subject comlied and taken into custody

Officer Information:

of officers present 6 # of officers injured: 0

Officer description: Uniform Plain Clothes

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

Route/Assignment: 3-3B
 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>RC</i>	Reviewed by: <i>Richard W Brennan</i>	Date: <u>10/24/16</u>
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MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015842	Officer Megowen, Robert G	Date: 10/20/2016	Time: 0912	Day: Thursday
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OIC Comment/Review:

Upon reviewing Officer Megowen's use of force, he complied with all New Hampshire RSA's, policies and SOP's in regard to the use of force. RWB Z-13


Sgt. Brennan



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case #	16-15882	Officer	Kulig, Sarah N	Date:	10/20/2016	Time:	1856	Day:	Thursday
Attached Reports: (Check All That Apply)									
<input checked="" type="checkbox"/> Incident Report <input type="checkbox"/> Arrest Report <input type="checkbox"/> Booking Photo									
Was an arrest made?			Suspect Name:				OIC at time of Incident:		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			N/A				Sgt Chris Biron		
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									
<u>Soft Hand Control</u>			<u>Hard Hand Control</u>			<u>Firearm</u>			
<input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control			<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)			<input type="checkbox"/> Handgun Deployed <input checked="" type="checkbox"/> Handgun Used <input type="checkbox"/> Rifle Deployed <input type="checkbox"/> Rifle Used <input type="checkbox"/> Shotgun Deployed <input type="checkbox"/> Shotgun Used			
<u>Secondary Weapon System</u>									
<input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input type="checkbox"/> Taser			<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						
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...									
Female deer struck by a vehicle was shot by Officer due to wounds from the accident. No decontamination.									
Officer Information:									
# of officers present			# of officers injured:						
1			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 type="checkbox"/> Verbal Commands used Before <input type="checkbox"/> Verbal Commands Used During <input type="checkbox"/> Verbal Commands Used After						
Miscellaneous Information:									
Offense/Charge:									
Lighting: <input type="checkbox"/> Daylight <input type="checkbox"/> Artificial <input type="checkbox"/> Low Light <input checked="" type="checkbox"/> Darkness									
Location: <input 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 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:				Reviewed by:			Date:		
<i>Sarah Kulig</i>				<i>CB</i>			10-20-16		

CS *mark*



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-15882	Officer Kulig, Sarah N	Date: 10/20/2016	Time: 1856	Day: Thursday
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OIC Comment/Review:

I reviewed the report as well as speaking with Ofc Kulig. Her use of discharging a firearm to dispatch an injured deer was appropriate.

Sgt Chris Biron



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



1003
VAD

Case # 16-15782	Officer: Rahill, Max E	Date: 10/19/2016	Time: 0003	Day: Wednesday
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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: Samantha Emerson	OIC at time of Incident: Lt Mangone
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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>Soft Hand Control</p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control <p>Secondary Weapon System</p> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input type="checkbox"/> Taser	<p>Hard Hand Control</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>Firearm</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...

Describe the effects of the force used on any persons involved, and any decontamination method used if any....
 SAMANTHA was transitioned to the ground by a take down and was effective. No decontamination needed.

Officer Information:

of officers present 5 # 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: RSA 642:2 Resisting Arrest, RSA 642:1 Obstructing Government Administration, RSA 644:2 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

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Signature of reporting officer: <i>[Signature]</i>	Reviewed by: <i>[Signature]</i> 6-7	Date: 10-19-16
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[Handwritten initials]



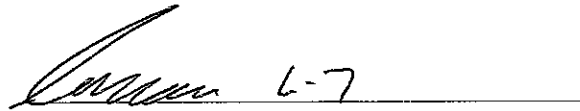
MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-15782	Officer Rahill, Max E	Date: 10/19/2016	Time: 0003	Day: Wednesday
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OIC Comment/Review:

I reviewed the reports, and I spoke to Ofc. Rahill. It appears that the proper amount of force was used in order to affect the arrest of this subject. NFI


Lt Mangone



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



1 MB
KC

Case # 16-15782	Officer: Jaworowski, Konrad	Date: 10/19/2016	Time: 0005	Day: Wednesday
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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: GRIKSCHKEIT, KYLE	OIC at time of Incident: LT. MANGONE
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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>Soft Hand Control</p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control <p>Secondary Weapon System</p> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input type="checkbox"/> Taser	<p>Hard Hand Control</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>Firearm</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 ABRASION TO SUSPECT'S RIGHT SIDE OF FOREHEAD

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....

USE OF FORCE WAS EFFECTIVE & NO DECONTAMINATION NECESSARY.

Officer Information:

of officers present 5 # 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: 	Reviewed by: 	Date: 10-19-16
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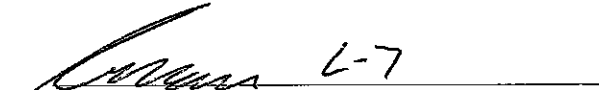
MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-15782	Officer Jaworowski, Konrad	Date: 10/19/2016	Time: 0005	Day: Wednesday
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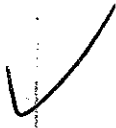
OIC Comment/Review:

I reviewed the reports in this matter, and I spoke to Ofc. Jaworowski. It appeared that the proper amount of force was used in order to affect the arrest of this subject. NFI


LT. MANGONE



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015586 Officer: O'Connor, Matthew W Date: 10/15/2016 Time: 0555 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 Jonathan Petrocelli Sgt. Cadwell

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>Soft Hand Control</p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control	<p>Hard Hand Control</p> <input type="checkbox"/> Open Hand Strike <input type="checkbox"/> Kick <input checked="" type="checkbox"/> Knee Strike <input type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p>Firearm</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...

Booking Officer Martens offered medical attention at the station, Petrocelli refused

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

Three knee strikes to the right side to attempt to gain control of a resisting and possibly armed subject

Officer Information:

of officers present: 5 # 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

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: *[Signature]* Date: 10/16/16




MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015586	Officer: O'Connor, Matthew W	Date: 10/15/2016	Time: 0555	Day: Saturday
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OIC Comment/Review:

I have reviewed the reports and spoke to the officers. This incident was dynamic situation involving a firearm. The application of force was reasonable in this situation.


Sgt. Cadwell



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case #	16-015586	Officer	Hardy, Ryan	Date:	10/15/2016	Time:	0317	Day:	Saturday	
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		Petrocelli, Jonathan				B. Caldwell				
Suspect Information: CHECK ALL THAT APPLY										
<input checked="" 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										
<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 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"/> Other (describe)			<input type="checkbox"/> Shotgun Used		<input type="checkbox"/> Gas Deployment- OC/CS					
<input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, describe below...				
Offered by Ofc. Martens, but refused medical										
Describe the effects of the force used on any persons involved, and any decontamination method used if any....										
Partial incapacitation to left leg. No medical needed, as probes did not break skin.										
Officer Information:										
# of officers present			# of officers injured:							
5			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:		11A								
<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: Resisting Arrest										
Lighting:		<input type="checkbox"/> Daylight		<input type="checkbox"/> Artificial		<input checked="" type="checkbox"/> Low Light		<input type="checkbox"/> Darkness		
Location:		<input type="checkbox"/> Indoors		<input checked="" 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:		
								2/6 10/16/16		

CS



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-501558	Officer: Hardy, Ryan	Date: 10/15/2016	Time: 0317	Day: Saturday
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OIC Comment/Review:

I have reviewed the reports and spoken to the officers. This incident was a dynamic situation involving a firearm. The application of force was reasonable to overcome a combative subject.


B. Caldwell



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015586	Officer Lamy, Raymond	Date: 10/15/2016	Time: 0320	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: PETROCELLI, Jonathan	OIC at time of incident: Caldwell
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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 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

Soft Hand Control <input checked="" type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control Secondary Weapon System <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input type="checkbox"/> Taser	Hard Hand Control <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)	Firearm <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...
 Minor bruise on left hand - did not require medical attention

Were any injuries sustained to suspect? Yes No If yes, describe below...
 He was limping as he was escorted to the transport vehicle but he only had one shoe on. He did not state any injuries to me at that time.

Was medical attention provided? Yes No If yes, describe below...
 Per Booking Officer Martens, PETROCELLI declined medical assistance

Describe the effects of the force used on any persons involved, and any decontamination method used if any....
 Suspect had fallen to the ground after running from officers. I was able to pin him to the ground using my body weight and was able to control his upper body movement while officers secured him in handcuffs. I did not apply any strikes to his body.

Officer Information:

of officers present 5 # 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:	Reviewed by: <i>[Signature]</i>	Date: 10/16/16
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CS



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015586	Officer Lamy, Raymond	Date: 10/15/2016	Time: 0320	Day: Saturday
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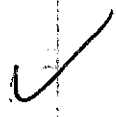
OIC Comment/Review:

I have reviewed the reports and spoken to the officers. This incident was a dynamic situation involving a fleeing suspect and firearm. The application of force was reasonable to overcome a combative subject.


Caldwell



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case #	16-015586	Officer	Gagne, Tyler J	Date:	10/15/2016	Time:	0317	Day:	Saturday
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Attached Reports: (Check All That Apply)

Incident Report
 Arrest Report
 Booking Photo

Was an arrest made?	Suspect Name:	OIC at time of Incident:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Petrocelli, Jonathan	Sgt. Caldwell

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>Soft Hand Control</p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control <p>Secondary Weapon System</p> <input type="checkbox"/> OC <input type="checkbox"/> Baton <input type="checkbox"/> K-9 <input type="checkbox"/> Other (describe) <input type="checkbox"/> Taser	<p>Hard Hand Control</p> <input type="checkbox"/> Open Hand Strike <input checked="" type="checkbox"/> Kick <input type="checkbox"/> Knee Strike <input type="checkbox"/> Take Down <input type="checkbox"/> Other (describe)	<p>Firearm</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...

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

Petrocelli ran from police and was taken to the ground where he continued to resist. Petrocelli was kicking his legs in an attempt to resist. I administered a kick to his left thigh (pain compliance to large muscle group) to stun/divert his attention.

Officer Information

# of officers present: <u>5</u>	# of officers injured: <u>0</u>
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: 2-5	
<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: Resisting arrest

Lighting:	<input type="checkbox"/> Daylight	<input type="checkbox"/> Artificial	<input checked="" type="checkbox"/> Low Light	<input type="checkbox"/> Darkness
Location:	<input type="checkbox"/> Indoors	<input checked="" 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 type="checkbox"/> Dry
	<input type="checkbox"/> Ice/Snow	<input type="checkbox"/> Debris	<input type="checkbox"/> No Debris	<input type="checkbox"/> Other 16

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> 216	Date: 10/16/16
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CS



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015586	Officer Gagne, Tyler J	Date: 10/15/2016	Time: 0317	Day: Saturday
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OIC Comment/Review:

I have reviewed the reports and spoken to the officers. This incident was a dynamic situation involving a fleeing suspect and firearm. The application of force was reasonable to overcome a combative subject.


Sgt. Caldwell



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015305 Officer: Beland, Adam R Date: 10/12/2016 Time: 0600 Day: Wednesday

Attached Reports: (Check All That Apply)

Incident Report Arrest Report Booking Photo

Was an arrest made? Yes No Suspect Name: Delalle Baez, Heibrahim OIC at time of Incident: Cpt Sanclemente/Sgt Marr

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>Soft Hand Control</p> <input type="checkbox"/> Joint Manipulation <input type="checkbox"/> Pressure Point Control	<p>Hard Hand Control</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>Firearm</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....

Officer Information:

of officers present 19 # 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: *[Signature]* Date: 10/12/16



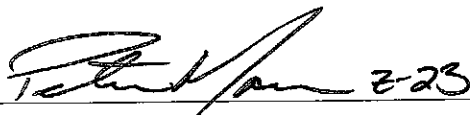
MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015305	Officer Beland, Adam R	Date: 10/12/2016	Time: 0600	Day: Wednesday
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OIC Comment/Review:

The use of force described in this report was planned as part of the Manchester Police Departments SWAT initiation to breach doors while serving a no-knock search warrant. I, Sgt. Peter Marr planned this operation and approved the use of the NFD in order to draw attention away from the doors being breached. This action created a safer environment for the Breacher and team as a whole during a very dangerous situation. The NFD was deployed in a safe area with no risk posed to anyone.


Cpt Sanclemente/Sgt Marr



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



KD
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Case # 16-015369	Officer Day, Christopher B	Date: 10/11/2016	Time: 1510	Day: Tuesday
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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: Richard Demers [REDACTED]	OIC at time of Incident: Lt Mucci
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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 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><u>Soft Hand Control</u></p> <input 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 checked="" 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...

Minor abrasion to left side of the suspects face near the eyebrow

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....

Struggled all the way to the Wagon but was able to be securely detained until shackles arrived.

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: Criminal Trespass, 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

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: 10/15/16
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MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015369	Officer Day, Christopher B	Date: 10/11/2016	Time: 1510	Day: Tuesday
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OIC Comment/Review:

I have reviewed Officer Day's Response to Resistance Report, the UCR-101 and spoke directly to Officer Day. Based on the information presented to me the use of force was justified and within policy.

Joseph J. Mucci
Lt Mucci 10-15-16



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015227 Officer: Megowen, Robert G Date: 10/8/2016 Time: 2157 Day: Saturday

Attached Reports: (Check All That Apply)

Incident Report Arrest Report Booking Photo

Was an arrest made?
 Yes No

Suspect Name:
Lang, Lashawn

OIC at time of Incident:
Lt. Mangone

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>Soft Hand Control</p> <input checked="" type="checkbox"/> Joint Manipulation
<input type="checkbox"/> Pressure Point Control

<p>Secondary Weapon System</p> <input type="checkbox"/> OC
<input type="checkbox"/> Baton
<input type="checkbox"/> K-9
<input type="checkbox"/> Other (describe)
<input type="checkbox"/> Taser | <p>Hard Hand Control</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>Firearm</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 |
|---|---|--|---|

Injury Information:

- Were any injuries sustained to officer? Yes No If yes, describe below...
small scratches to finger
- 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....
Only physical pulling to secure belligerent female into handcuffs.

Officer Information:

- # of officers present: 1 # of officers injured: 1
- Officer description: Uniform Plain Clothes
- Duty Status: On Duty Off Duty On Duty Detail/Location CMC
- 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: Reviewed by: Date: 10.09.16



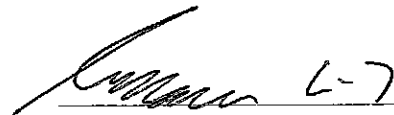
MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-015227	Officer: Megowen, Robert G	Date: 10/8/2016	Time: 2157	Day: Saturday
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OIC Comment/Review:

I reviewed the reports and spoke to Ofc. Megowen. It appears that the correct level of Force was applied given the circumstances. No further review is required.



Lt. Mangone



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



RD

Case #	16-014896	Officer	Foster, Benjamin C	Date:	10/3/2016	Time:	0954	Day:	Monday
Attached Reports: (Check All That Apply)									
<input checked="" type="checkbox"/> Incident Report			<input checked="" type="checkbox"/> Arrest Report			<input type="checkbox"/> Booking Photo			
Was an arrest made?		Suspect Name:				OIC at time of Incident:			
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Isaac Lubin				Lt. Vincent			
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 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, describe below...			
Minor abrasions									
Were any injuries sustained to suspect?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, describe below...			
Minor abrasions									
Was medical attention provided?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, describe below...			
Offender was transported to the Elliot for his behavior under the influence of drugs, not in relation to the arrest.									
Describe the effects of the force used on any persons involved, and any decontamination method used if any....									
It was difficult to control the offender while he was on his feet so he was transitioned to the ground where we were able to place him in handcuffs.									
Officer Information:									
# of officers present			# of officers injured:						
3			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 type="checkbox"/> Verbal Commands Used After			
Miscellaneous Information:									
Offense/Charge: Resisting Detention RSA 642:2									
Lighting:		<input checked="" type="checkbox"/> Daylight		<input type="checkbox"/> Artificial		<input type="checkbox"/> Low Light		<input type="checkbox"/> Darkness	
Location:		<input type="checkbox"/> Indoors		<input checked="" type="checkbox"/> Outdoors					
Weather Conditions		<input checked="" 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 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:	
<i>[Signature]</i>				Vincent				10/3/16	

a1 CS



MANCHESTER NH POLICE DEPARTMENT RESPONSE TO RESISTANCE REPORT



Case # 16-014896	Officer Foster, Benjamin C	Date: 10/3/2016	Time: 0954	Day: Monday
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OIC Comment/Review:

I have spoken with Officer Foster about this incident and I have reviewed the report submitted in relation to this incident and I find that Officer Foster's response to this subject's resistive behavior was appropriate and necessary to gain compliance and control of this individual. I also found that he used a minimal amount of force in gaining compliance during this incident.

No booking photo taken since subject was uncooperative during booking process. He was taken to the Elliot where he was identified and eventually released to his mother while still receiving medical care.

Lt. Vincent