

TACTICAL RESPONSE REPORT/Chicago Police Department

1. DATE OF INCIDENT 30-APR-2013		TIME 21:23:00		2. ADDRESS OF OCCURRENCE 8850 S BURLEY AVE CHICAGO, IL 60617				3. LOCATION CODE 303		4. BEAT/OCCUR 0424		
MEMBER INVOLVED	5. POSITION 9161	6. LAST NAME WAKE	7. FIRST NAME THOMAS J		8. STAR NO. 7403	9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	10. RACE CODE WHI	11. AGE [REDACTED]	12. HT. 604	13. WT. 170		
	14. DATE OF APPT. 25-OCT-2004		15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT 004 0432		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		19. MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No	
SUBJECT INFORMATION	20. LAST NAME BOOTH		21. FIRST NAME WILLIE		22. M.I. [REDACTED]	23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	24. RACE BLK	25. D.O.B. [REDACTED]	26. HT. 602	27. WT. 270		
	28. ADDRESS [REDACTED]			29. TELEPHONE NO. [REDACTED]		30. WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		
33. WHERE WAS MEDICAL TREATMENT OBTAINED?			34. BY WHOM?		35. CONDITION <input type="checkbox"/> 03 Hospitalized <input checked="" type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence			36. CHARGES PLACED 515 ILCS 5.0/1-200, 720 ILCS 5.0/12-5-A, 720 ILCS 5.0/12-2-A-16				
37. CB NO. 18648535			IR NO. [REDACTED]		DNA <input type="checkbox"/>		DNA <input type="checkbox"/>					
REASON FOR USE OF FORCE (Check all that apply)	38. DINA <input type="checkbox"/>		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT/ASSAULT		ASSAILANT/BATTERY		ASSAILANT DEADLY FORCE	
	SUBJECT'S ACTIONS		MEMBER'S RESPONSE									
39. OCCHEMICAL WEAPON AUTHORIZED BY (NAME)			40. ADDITIONAL INFORMATION									
WEAPON DISCHARGE INCIDENT	41. WEAPON TYPE		42. INCIDENT OCCURRED		43. LIGHTING CONDITIONS		44. WEATHER CONDITIONS		45. MAKE/MANUFACTURER			
	46. MODEL		47. BARREL LENGTH		48. CALIBER/GAUGE		49. TASER PART ID NO.		50. WEAPON SERIAL NO. (include letters)		51. CHICAGO GUN REG. NO.	
	52. IL FIREARM OWNER ID. NO.		53. HANDGUN CERTIFICATE NO.		54. SPECIAL WEAPON CERTIFICATE NO.		55. PROPERTY INVENTORY NO.		56. TYPE OF AMMUNITION USED		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER	
	58. TOTAL NO. OF SHOTS MEMBER FIRED		59. WHO FIRED FIRST SHOT		60. WAS FIREARM RELOADED DURING INCIDENT		61. NO. OF CARTRIDGES/SHOT SHELLS RELOADED		62. HOW WAS MEMBER'S HANDGUN WORN		63. DID MEMBER USE SIGHTS	
	64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)		66. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED		67. POSITION OF MEMBER DISCHARGING WEAPON		68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON		69. POSITION OF MEMBER DISCHARGING WEAPON	
	70. EVENT NO. 1312017321		71. R.D. NO. HW254795		72. NOTIFICATIONS (OC OR TASER INCIDENT):		73. REPORTING MEMBER (Print Name)		STAR/EMPLOYEE NO.		SIGNATURE	
	74. REVIEWING SUPERVISOR (Print Name)		STAR NO.		SIGNATURE		DATE REVIEWED		TIME			
	75. SIGNATURES											

LOG# 1061883

Attachment

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WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING: 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

DNA REFUSED UNABLE TO INTERVIEW (Specify Reason)

The Subject was interviewed in the 004th District and stated: "Man, I so sorry, I so sorry...I apologize. I know I acked the fool, but it was all about my play-cuzin, ya undertan...I didn't mean nothin by it."

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

The Sergeant's response to the Assailant was in compliance with Department Use of Force Policy and Directives.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO _____ OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

RICHARDS, MAURICE V

SIGNATURE



DATE COMPLETED TIME

01-MAY-2013 02:09:38

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF: SUPPLEMENTARY REPORT I.O.D. REPORT
 CASE REPORT OFFICER BATTERY REPORT CR INITIATION REPORT
 ARREST REPORT TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

80. TOTAL TRR'S THIS EVENT No.

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