

**TACTICAL RESPONSE REPORT/Chicago Police Department**

1. DATE OF INCIDENT <b>04-MAY-2015</b>		TIME <b>00:50:00</b>		2. ADDRESS OF OCCURRENCE <b>5555 W GRAND AVE CHICAGO, IL 60639</b>			3. LOCATION CODE <b>281</b>		4. BEAT/OCCUR <b>2515</b>									
MEMBER INVOLVED	5. POSITION <b>9122</b>		6. LAST NAME <b>WILLABY</b>		7. FIRST NAME <b>HENRY D</b>		8. STAR NO.		9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10. RACE CODE <b>BLK</b>		11. AGE [REDACTED]		12. HT. <b>506</b>		13. WT. <b>165</b>	
	14. DATE OF APPT. <b>05-DEC-2005</b>			15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT <b>025 2502</b>		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19. MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No						
SUBJECT INFORMATION	20. LAST NAME <b>GAMA</b>			21. FIRST NAME <b>MIGUEL</b>			22. M.I.		23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24. RACE <b>WWH</b>		25. D.O.B. <b>14-MAY-1987</b>		26. HT. <b>508</b>		27. WT. <b>260</b>	
	28. ADDRESS <b>2520 N NEW ENGLAND AVE CHICAGO, IL 60707</b>				29. TELEPHONE NO.		30. WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No			31. SUBJECT INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		32. SUBJECT ALLEGED INJURY? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No						
	33. WHERE WAS MEDICAL TREATMENT OBTAINED?				34. BY WHOM?		35. CONDITION <input type="checkbox"/> 01 Apparently Normal <input checked="" type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid											
	36. CHARGES PLACED <b>720 ILCS 5.0/31-1-A, 720 ILCS 5.0/31-1-A, 720 ILCS 5.0/12-2-B-4</b>										37. CB NO. <b>19108269</b>		IR NO. [REDACTED]					
REASON FOR USE OF FORCE (Check all that apply)	38. <input type="checkbox"/> DNA		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT: ASSAULT		ASSAILANT: BATTERY		ASSAILANT: DEADLY FORCE							
	DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/>		FLED <input checked="" type="checkbox"/>		IMMINENT THREAT OF BATTERY <input type="checkbox"/>		ATTACK WITH WEAPON <input type="checkbox"/>		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/>									
	STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/>		PULLED AWAY <input checked="" type="checkbox"/>		OTHER _____		ATTACK WITHOUT WEAPON <input type="checkbox"/>		WEAPON <input type="checkbox"/>									
MEMBER'S RESPONSE	MEMBER PRESENCE <input checked="" type="checkbox"/>		OPEN HAND STRIKE <input type="checkbox"/>		ELBOW STRIKE <input type="checkbox"/>		KNEE STRIKE <input type="checkbox"/>		FIREARM <input type="checkbox"/>									
	VERBAL COMMANDS <input checked="" type="checkbox"/>		TAKE DOWN / EMERGENCY HANDCUFFING <input checked="" type="checkbox"/>		CLOSED HAND STRIKE/PUNCH <input type="checkbox"/>		KICKS <input type="checkbox"/>		OTHER _____									
WEAPON DISCHARGE INCIDENT	41. WEAPON TYPE			42. INCIDENT OCCURRED			43. LIGHTING CONDITIONS			44. WEATHER CONDITIONS								
	<input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER			<input checked="" type="checkbox"/> Indoors <input type="checkbox"/> Outdoors			<input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input checked="" type="checkbox"/> 06 Good Artificial			<b>RAIN</b>								
	45. MAKE/MANUFACTURER			46. MODEL			47. BARREL LENGTH			48. CALIBER/GAUGE								
	49. TASER DART 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 <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (Specify)			60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO									
61. NO OF CARTRIDGES/ SHOT SHELLS RELOADED			62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)			63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)			64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD									
65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO			66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)			67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.			68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBER'S WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN									
69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)			70. EVENT NO. <b>1512314094</b>			71. R.O. NO. <b>HY246134</b>			72. CASE INFO.									
73. REPORTING MEMBER (Print Name) <b>WILLABY, HENRY D</b>			STAR/EMPLOYEE NO [REDACTED]			SIGNATURE [REDACTED]			73. NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DSS & LT./DIST. OF OCCUR. <input type="checkbox"/> CPIC									
74. REVIEWING SUPERVISOR (Print Name) <b>O DONNELL, JOHNNY</b>			STAR NO. <b>2018</b>			SIGNATURE [REDACTED]			73. NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DSS/DIST. OF OCCUR & OCIC <input type="checkbox"/> CPIC <input type="checkbox"/> DET. DIV.									
74. REVIEWING SUPERVISOR (Print Name) <b>O DONNELL, JOHNNY</b>			STAR NO. <b>2018</b>			SIGNATURE [REDACTED]			74. DATE REVIEWED TIME <b>04-MAY-2015 03:15:11</b>									

LOG # 1074984  
Attachment 19

### LIEUTENANT OR ABOVE/OCIC REVIEW

THE ON-CALL INCIDENT COMMANDER (OCIC) WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS INVOLVING THE DISCHARGE OF A FIREARM BY A DEPARTMENT MEMBER, 2.) ALL INCIDENTS INVOLVING THE SERIOUS INJURY OR DEATH OF A MEMBER OF THE PUBLIC SUBSEQUENT TO INTERACTIONS WITH A DEPARTMENT MEMBER; 3.) ALL INCIDENTS INVOLVING THE DISCHARGE OF IMPACT MUNITIONS BY A DEPARTMENT MEMBER; 4.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 THROUGH 3.

THE ASSIGNED INVESTIGATING SUPERVISOR THE RANK OF LIEUTENANT OR ABOVE FROM THE DISTRICT OF OCCURRENCE WILL COMPLETE THE REVIEW SECTION FOR ALL OTHER INCIDENTS.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

DNA

REFUSED

INTERVIEW NOT CONDUCTED (Specify Reason)

Subject repeatedly screamed that he wanted his phone call.

76. LIEUTENANT OR ABOVE/OCIC RATIONALE FOR BOX 77 FINDING

The Detention Aide was within Department Guidelines on the Use of Force.

77. LIEUTENANT OR ABOVE/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. LIEUTENANT OR ABOVE/OCIC (Print Name)

**PLATT, MARY E**

SIGNATURE



DATE COMPLETED

TIME

**04-MAY-2015 03:24:38**

79. TOTAL TRR's THIS EVENT No.

**6**