

**TACTICAL RESPONSE REPORT/Chicago Police Department**

1. DATE OF INCIDENT <b>03-MAY-2015</b>		TIME <b>18:45:00</b>		2. ADDRESS OF OCCURRENCE <b>2457 N OAK PARK AVE CHICAGO, IL 60707</b>			3. LOCATION CODE <b>303</b>		4. BEAT/OCCUR <b>2512</b>								
MEMBER INVOLVED	5. POSITION <b>9161</b>	8. LAST NAME <b>VOGT</b>		7. FIRST NAME <b>VINCENT N</b>		8. STAR NO. <b>6802</b>	9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	10. RACE CODE <b>WHI</b>	11. AGE [REDACTED]	12. HT <b>509</b>	13. WT. <b>200</b>						
	14. DATE OF APPT. <b>24-JAN-2000</b>		15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT <b>025 2512</b>		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 <b>OCAMPO</b>		21. FIRST NAME <b>ADRIAN</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>24-DEC-1983</b>		26. HT. <b>508</b>	27. WT. <b>190</b>						
	28. ADDRESS <b>2509 W CORTLAND ST CHICAGO, IL 60647</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? <b>OUR LADY OF RESURRECTION MEDICAL CE</b>				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 550.0/4-B, 720 ILCS 5.0/12-2-B-4</b>									
37. CB NO. <b>19108265</b>		IR NO.		38. DNA		39. DNA											
REASON FOR USE OF FORCE (Check all that apply)	SUBJECT'S ACTIONS		MEMBER'S RESPONSE		ASSAILANT: ASSAULT		ASSAILANT: BATTERY		ASSAILANT: DEADLY FORCE								
	DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/> OTHER _____		MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input checked="" type="checkbox"/> WRISTLOCK <input checked="" type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		FLED <input checked="" type="checkbox"/> PULLED AWAY <input checked="" type="checkbox"/> OTHER _____		IMMINENT THREAT OF BATTERY <input type="checkbox"/> OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____						
39. DNA		40. ADDITIONAL INFORMATION		41. WEAPON TYPE		42. INCIDENT OCCURRED		43. LIGHTING CONDITIONS		44. WEATHER CONDITIONS							
41. WEAPON TYPE		42. INCIDENT OCCURRED		43. LIGHTING CONDITIONS		44. WEATHER CONDITIONS		45. MAKE/MANUFACTURER		46. MODEL		47. BARREL LENGTH		48. CALIBER/GAUGE			
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		60. WAS FIREARM RELOADED DURING INCIDENT		61. NO OF CARTRIDGES/ SHOT SHELLS RELOADED		62. HOW WAS MEMBER'S HANDGUN WORN	
63. HOW WAS MEMBER'S HANDGUN DRAWN		64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65. DID MEMBER USE SIGHTS		66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)		67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED		68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON		69. POSITION OF MEMBER DISCHARGING WEAPON		70. EVENT NO. <b>1512314094</b>		71. R.D. NO. <b>HY245847</b>	
72. CASE INFO.		73. REPORTING MEMBER (Print Name)		STAR/EMPLOYEE NO.		SIGNATURE		74. REVIEWING SUPERVISOR (Print Name)		STAR NO.		SIGNATURE		DATE REVIEWED		TIME	
73. REPORTING MEMBER (Print Name) <b>VOGT, VINCENT N</b>		STAR/EMPLOYEE NO. <b>6802</b>		SIGNATURE [REDACTED]		74. REVIEWING SUPERVISOR (Print Name) <b>SULLIVAN, JOSEPH D</b>		STAR NO. <b>2632</b>		SIGNATURE [REDACTED]		DATE REVIEWED <b>03-MAY-2015 20:07:58</b>		TIME <b>03-MAY-2015 20:07:58</b>		[REDACTED]	
74. REVIEWING SUPERVISOR (Print Name) <b>SULLIVAN, JOSEPH D</b>		STAR NO. <b>2632</b>		SIGNATURE [REDACTED]		DATE REVIEWED <b>03-MAY-2015 20:07:58</b>		TIME <b>03-MAY-2015 20:07:58</b>		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	

LOG # 1074984

Attachment # 24

### 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)

Arrestee is currently being treated at OLR Hospital.

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

In R/Lt's opinion, the officer's actions were both reasonable and necessary to place the arrestee into physical custody.

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)

**STOPPA, KENNETH A**

SIGNATURE



DATE COMPLETED

TIME

**03-MAY-2015 20:50:52**

79. TOTAL TRR's THIS EVENT No.

**6**