

**OFFICER'S BATTERY REPORT**  
**CHICAGO POLICE DEPARTMENT**

RD NO **HY335302**

INSTRUCTIONS: This form is to be completed for all incidents when: (1) a sworn member is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while performing a police function either on-duty or off-duty, (2) a detention aide is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while in the performance of his or her duties.

**"X APPLICABLE BOXES"**

OFFICER INFORMATION		INCIDENT INFORMATION	
NAME (LAST - FIRST - M.I.) <b>ROBERTS, JOHN E</b>		1 INDOOR <input checked="" type="checkbox"/> 2. OUTDOOR	
STAR NO. <b>2196</b>	POSITION <b>SERGEANT OF POLICE</b>	ADDRESS OF OCCURRENCE <b>10639 S COTTAGE GROVE AVE</b>	
DATE OF APPOINTMENT <b>26-MAR-1990</b>	EMPLOYEE NO. [REDACTED]	CITY <input checked="" type="checkbox"/> CHICAGO	STATE (if outside Chicago)
UNIT OF ASSIGNMENT <b>193</b>	BEAT/CALL NO. <b>6565</b>	LOCATION CODE <b>304-STREET</b>	BEAT OF OCCURRENCE <b>0512</b>
SEX <input checked="" type="checkbox"/> 1. M    2. F	RACE <b>WHITE</b>	DATE OF OCCURRENCE <b>10-JUL-2015</b>	TIME <b>16:03:00</b>
HEIGHT <b>600</b>	WEIGHT <b>170</b>	DAY OF WEEK <b>FRIDAY</b>	
TYPE OF ASSIGNMENT WHEN BATTERY OCCURRED		NO. OF OFFICERS BATTERED <b>8</b>	
<input checked="" type="checkbox"/> 1 ON DUTY A. UNIFORM, PATROL DUTY B. UNIFORM, OTHER DUTY Describe _____ <input checked="" type="checkbox"/> C. CITIZEN'S DRESS D. TACTICAL E. B.I.S. UNIT F. SPECIAL EMPLOYMENT G. OTHER _____ 2. OFF DUTY 3. SPECIAL EMPLOYMENT 4. SECONDARY / OTHER		WERE THERE ASSISTING UNITS ON SCENE?    1. <input checked="" type="checkbox"/> YES    2. NO IF YES HOW MANY ASSISTING OFFICERS WERE PRESENT AT TIME BATTERY (EXCLUDING YOU OR YOUR PARTNERS)? <b>7</b>	
WORKING <input checked="" type="checkbox"/> A. ALONE B. WITH ONE PARTNER C. WITH MULTIPLE PARTNERS How many? _____ PATROL TYPE: A. SQUAD CAR B. FOOT C. BICYCLE D. APV/MOTORCYCLE E. SQUADROL <input checked="" type="checkbox"/> F. OTHER <u>INVESTIGATIVE</u>		<b>MANNER OF ATTACK</b>	
TYPE OF ACTIVITY		01 SHOT 02. SHOT AT 03. STABBED/CUT (INCLUDING ACTUAL ATTEMPT) 04. STRUCK/BLUNT FORCE (INCLUDING ACTUAL ATTEMPT) <input checked="" type="checkbox"/> 05. OTHER (INCLUDING VERBAL THREATS)	
A. AMBUSH - NO WARNING <input checked="" type="checkbox"/> B. TRAFFIC STOP/PURSUIT C. INVESTIGATING SUSPICIOUS PERSON D. DISTURBANCE - DOMESTIC E. DISTURBANCE - MENTAL PATIENT F. DISTURBANCE - RIOT/MOB ACTION/CIVIL DISORDER G. DISTURBANCE - OTHER <input checked="" type="checkbox"/> H. MAN WITH A GUN I. PURSUING/ARRESTING OFFENDER (Specify) CHARGE _____ IUCR CODE _____ J. PROCESSING/TRANSPORTING/GUARDING A PRISONER (Specify) ORIGINAL CHARGE _____ ORIGINAL IUCR CODE _____ K. OTHER		<b>TYPE OF WEAPON/THREAT</b> (Check all that apply): <input checked="" type="checkbox"/> A. FIREARM CALIBER <u>45 ACP</u> 1. REVOLVER <input checked="" type="checkbox"/> 2. SEMI-AUTOMATIC 3. RIFLE 4. SHOTGUN B. VEHICLE 1 OFFICER STRUCK WITH VEHICLE 2. ATTEMPTED TO STRIKE OFFICER WITH VEHICLE C. KNIFE/OTHER CUTTING INSTRUMENT    I. BLUNT INSTRUMENT FIREARM USE INFORMATION    (Check all that apply) <input checked="" type="checkbox"/> A. OFFICER AT GUNPOINT B. OFFICER'S OWN WEAPON OBTAINED C. ATTEMPTED TO OBTAIN OFFICER'S OWN WEAPON	
TYPE OF INJURY TO OFFICER		<b>OFFENDER INFORMATION</b>	
A. FATAL B. NON-FATAL - MAJOR INJURY (Broken Bones/Serious Lacerations/Internal Injuries) C. NON-FATAL - MINOR INJURY (Bruises/Swelling/Minor Abrasions) <input checked="" type="checkbox"/> D. NONE APPARENT/NONE		SEX <input checked="" type="checkbox"/> 1. M    2. F    RACE <b>BLACK</b> DOB [REDACTED] CB NO.    IR NO. <b>00000000</b>	
LIGHTING CONDITIONS AT INCIDENT <input checked="" type="checkbox"/> A. DAYLIGHT    D. DUSK B. NIGHT    E. ARTIFICIAL LIGHT C. DAWN    1 POOR 2. GOOD		WAS THE OFFENDER'S ACTIVITY: DRUG RELATED?    GANG RELATED? 1. YES    1 YES 2. NO    2. NO <input checked="" type="checkbox"/> 3. UNKNOWN <input checked="" type="checkbox"/> 3. UNKNOWN NO. OF OFFENDERS PRESENT? <b>1</b>	
WEATHER CONDITIONS <input checked="" type="checkbox"/> A. CLEAR    D. FOG / SMOKE / HAZE    G. OTHER B. RAIN    E. SLEET / HAIL C. SNOW    F. SEVERE CROSS WIND APPROXIMATE OUTDOOR TEMPERATURE <b>72°F</b>			

*Log 1076081  
 U#1570    AH-27*

R/O & ASSISTING OFFICERS WERE IN FEAR OF RECEIVING GREAT BODILY HARM & DEATH  
WHEN THE OFFENDER MCSWAIN, WHILE ARMED WITH A COLT, .45 CALIBER SEMI-  
AUTOMATIC PISTOL PRESENTED A THREAT TO R/O'S & ASSISTING OFFICERS.

REPORTING MEMBER - SIGNATURE  
ROBERTS, JOHN E

STAR NO.  
2196

WATCH COMMANDER /UNIT COMMANDING OFFICER- SIGNATURE STAR NO.  
WALLER, FRED L 464

Log 1076081  
V# 15-10  
AA-27