TACTICAL RESPONSE REPORT / Chicago Police Department ADDRESS OF OCCURRENCE 5200 W LE MOYNE ST LOCATION CODE VIDEO RECORDED INCIDENT ■ BWC IN-CAR VIDEO CHICAGO, IL 60651 18-DEC-2020 1147 2532 ☐ OTHER VIDEO BUSINESS NAME ■ DNA FXACT AREA WITHIN LOCATION (F.G. BASEMENT STAIRWAY BEDROOM) ASSIGNMENT TYPE OTHER N-VIEW NCIDENT INTERSECTION SUPERVISOR DIRECTED
CALL FOR SERVICE INVOLVED A PURSUIT? IR NO. CB NO. EVENT NO. RD NO. IUCR CODE □ FOOT X NO 04870 JD462480 □ VEHICLE OTHER ☐ DUSK ☐ DAWN ☐ ARTIFICIAL RAIN SNOW/ICE WEATHER MEMBER WAS? LIGHTING PATROL TYPE? □ BICYCLE ■ SQUADROL ■ OTHER: INCIDENT ASSIST UNITS ■ POLICE CAR MOTORCYCLE/ VAN/BUS ■ DAYLIGHT
■ DARKNESS □ ALONE ON SCENE? INDOOR X CLEAR FOG FOOT WITH PARTNER YES X NO **X** OUTDOOR ☐ CLOUDY EMPLOYEE NO. SEX LAST NAME FIRST NAME WATCH WT RACE AGE INVOLVED MEMBER X M 9161 FREDERICK DALE 32 Gun Shot
Fatal ■ Minor Contusion/Laceration DATE OF APPT. UNIT & BEAT OF ASSIGN IN UNIFORM? TYPE OF MEMBER INJURY Laceration Requiring Sutures DUTY STATUS Complaint of Substantial Pain Significant Contusion Broken/Fractured Bone(s) Fatal
Heart Attack/Stroke/Aneurysm Other (Explain None / None Apparent **X**ON ☐ OFF X YES NO 27-MAY-2014 7662C Minor Swelling FIRST NAME AST NAME DNA X M 🔲 F UNKNOWN BLACK FORMATION ECT ADDRESS TELEPHONE NO. Disability CONDITION ☐ Injured Not by the Member's Force Under Influence of Drugs Apparently Normal OTHER (Specify) Alleges Injury by Membe Mental Illness / ■ Under Influence of Alcohol SUBJ Injured by Member **Emotional Disorde** SUBJECT INJURY BY MEMBER'S USE OF FORCE? MEDICAL TREATMENT? ☐ Taken to Hospital (Specify) ☐ OTHER (Specify) Performed by Member None/None Apparent Non-Fatal - Minor Injury UNK
Subject Alleged Injury Non-Fatal - Major Injury Fata Refused Medical Aid Offered/EMS Performed by CFD EMS WAS SUBJECT ARMED WITH WEAPON? NO X YES, DESCRIBE BELOW DID NOT FOLLOW PHYSICAL ATTACK WITHOUT П THROWN OBJECT (DESCRIBE) BLUNT OBJECT KNIFE/CUTTING VERBAL DIRECTION WEAPON. (SPECIFY) SHOTGUN DNA (DESCRIBE) INSTRUMENT UNABLE TO UNDERSTAND VERBAL DIRECTION HAND/ARM/ELBOW STRIKE SEMI-AUTO EXPLOSIVE DEVICE IMMINENT THREAT OF BATTERY WITH WEAPON X KNEE/LEG STRIKE VERBAL THREATS CHEMICAL WEAPON PISTOL LINK OTHER (DESCRIBE) REVOLVER ATTEMPT TO OBTAIN MEMBER'S MOUTH/TEETH/SPIT TASER/STUN GUN STIFFENED WEAPON SUBJECT'S ACTIONS (Check all that apply) (DEAD WEIGHT) RIFLE PUSH/SHOVE/PULL PHYSICAL ATTACK WITH WEAPON PULLED AWAY GRAB/HOLD/RESTRAIN USED FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM WEAPON/OBJECT PERCEIVED AS: WRESTLE/GRAPPLE OTHER (DESCRIBE) ON-VIEW SHOOTING IMMINENT THREAT OF OTHER (DESCRIBE) WEAPON USE BATTERY - NO WEAPON ■ DNA ◻ Obtained Member's Weapon Attack Member DID THE SUBJECT COMMIT AN ASSAULT OR SUBJECT ACTIVITY Drug-Related? ■ NO Possessed Used - Attacked Member Member at Gunpoint BATTERY AGAINST THE INVOLVED MEMBER Gang-Related? PERFORMING A POLICE FUNCTION? X YES YES X NO ☐ YES NO (■ Displayed, Not Used TYPE OF ACTIVITY ■ Processing/Transporting/Guarding Arrestee Ambush - No Warning ■ Disturbance - Riot/Mob ы Disturbance - Other ■ Disturbance - Dome Action/Civil Disorde ■ Pursuing/Arresting Subject Other - Describe in Narrative ☐ Traffic Stop П Disturbance - Mental Health Investigatory Stop REASON FOR RESPONSE? ■ Defense of Self Defense of Member of Public Stop Self-Inflicted Harm Subject Armed with Weapon Defense of Department Memb Overcome Resistance or Aggression Fleeing Subject ■ Unintentional CONTROL TACTICS FORCE MITIGATION EFFORTS MA MA MEMBER ZONE OF SAFETY MOVEMENT TO HANDCUFFS/PHYSICAL **ESCORT HOLDS** CONTROL INSTRUMENT TACTICAL NONE X AVOID ATTACK POSITIONING RESTRAINTS UNK PRESSURE SENSITIVE AREAS OTHER WRISTLOCK OTHER VERBAL DIRECTION/ CONTROL TECHNIQUES SPECIALIZED ADDITIONAL 먎 EMERGENCY HANDCUFFING UNITS UNIT MEMBERS ARMBAR S RESPONS that apply) RESPONSE WITHOUT WEAPONS RESPONSE WITH WEAPONS LESS LETHAL SHOTGUN KICKS TASER REVOLVER SEMI-AUTO OPEN HAND STRIKE OC/CHEMICAL WEAPON (DESCRIBE BELOW) OTHER OC/CHEMICAL WEAPON TAKE DOWN တ CANINE RIFLE SHOTGUN W/ AUTHORIZATION¹ OTHER IMPACT MUNITIONS EMBER (Check **ELBOW STRIKE** BATON/EXPANDABLE (DESCRIBE BELOW) LRAD W/ OTHER BATON CLOSED HAND AUTHORIZATION' STRIKE/ PUNCH UNIT NO. 'AUTHORIZED BY (NAME) STAR NO KNEE STRIKE WAS ANY REPORTABLE FORCE USED AGAINST THE SUBJECT WHILE HANDCUFFED OR OTHERWISE IN PHYSICAL RESTRAINTS? IF YES, DESCRIBE SUBJECT'S ACTIONS AND MEMBER'S RESPONSE IN THE NARRATIVE SECTION X SEMI-AUTO PISTOL ☐ SHOTGUN NO. OF DISCHARGES WEAPON TYPE: WEAPON SERIAL NO WEAPON CERT. NO. П CHEMICAL WEAPON OTHER ■ REVOLVER DNA 3 TASER DID THIS WEAPON CONTRIBUTE TO A DID THE DISCHARGE RESULT IN A SELF-INFLICTED INJURY? WAS SUBJECT VEHICLE USE AS A WEAPON? **WEAPON DISCHARGE** SUBJECT INJURY? NO X NO NO ☐ YES-SUBJECT ☐ YES-MEMBER NO YES - AGAINST MEMBER ☐ YES - AGAINST OTHER PERSON WAS DISCHARGE ONLY TO WAS THIS AN UNINTENTIONAL DISCHARGE PERSON/OBJECT(S) STRUCK BY THE DISCHARGE OF MEMBER'S WEAPON (CHECK ALL THAT APPLY): DURING A NON-CRIMINAL INCIDENT? ■ ANIMAL ■ NONE SUBJECT ■ DEPARTMENT ☐ OTHER OBJECT ☐ YES X NO ☐ YES X NO **I** UNKNOWN OTHER PERSON ADDITIONAL ENERGY CYCLES

☐ TRIGGER ☐ DNA ☐ 1 ☐ 2 ☐ OTHER TASER TASER CARTRIDGE ID NO.(S) PROPERTY INVENTORY NO RIDGES DISCHARGED CONTACT STUN □ 1 □ 2 □ DNA DISCHARGE ☐ 1 ☐ 2 ☐ DNA □ 1 □ 2 □ DNA DNA 1 2 OTHER □ OTHER ONLY OTHER □OTHER FIREARM DID MEMBER FIRE AT A VEHICLE? WHO FIRED FIRST SHOT? TOTAL NO. OF SHOTS WAS FIREARM RELOADED MAKE/ MANUFACTURER MODEL ■ MEMBER ■ OTHER (Specify) MEMBER DURING INCIDENT? DISCHARGE

YES X NO

✗ OFFENDER

FIRED

🗷 NO 🔲 YES

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NOTIFICATIONS AND NARRATIVE
NOTIFICATIONS (ALL INCIDENTS): X IMMEDIATE SUPERVISOR X DISTRICT OF OCCURRENCE NOTIFICATIONS (WEAPONS DISCHARGE AND DEADLY FORCE): X OEMC X CPIC
NARRATIVE (IF APPLICABLE, DESCRIBE WITH SPECIFICITY, (1) THE USE OF FORCE INCIDENT, (2) THE SUBJECT'S ACTIONS, AND (3) THE DEPARTMENT MEMBER'S RESPONSE, INCLUDING FORCE MITIGATION EFFORTS AND SPECIFIC TYPES AND AMOUNT OF FORCE USED. THE INVOLVED MEMBER WILL NOT COMPLETE THE NARRATIVE SECTION FOR ANY FIREARM DISCHARGE INCIDENTS (WITH OR WITHOUT INJURY) OR IN ANY USE OF FORCE INCIDENTS RESULTING IN DEATH.) POLICE INVOLVED SHOOTING.
REPORTING MEMBER (Print Name) STAR/EMPLOYEE NO. SIGNATURE
REVIEWING SUPERVISOR
TYPE OF SUBJECT INJURY Minor Contusion Significant Contusion Gun Shot HOW WAS INJURY SUSTAINED? Intentional Act by Self Intentional Act by Other Intentional Act by Member Intentional Act by Self Unintentional
SUPERVISOR ON-SCENE RESPONSE NO X YES EVIDENCE TECHNICIAN? NOTIFIED X RESPONDED DNA
ATTACHMENTS: X CASE REPORT ARREST REPORT SUPPLEMENTARY REPORT INVENTORY IOD REPORT TASER DOWNLOAD X OTHER
REVIEWING SUPERVISOR: I HAVE COMPLIED WITH THE DUTIES OUTLINED IN G03-02-02. LOG NUMBER OBTAINED FROM THE CIVILIAN OFFICE OF POLICE ACCOUNTABILITY (COPA). LOG NUMBER OBTAINED FROM THE CIVILIAN OFFICE 2020-0005621
I HAVE REVIEWED THIS TACTICAL RESPONSE REPORT AND AFFIRM THAT THE REPORT IS LEGIBLE AND COMPLETE.
REVIEWING SUPERVISOR NAME (Print) STAR NO. SIGNATURE DYCKMAN, JOHN 1042 DATE/TIME COMPLETED 18-DEC-2020 1820
DISTRIBUTION OF TRR: IF A PAPER TRR WAS COMPLETED DUE TO AN UNAVAILABILITY OF THE AUTOMATED TACTICAL RESPONSE REPORT APPLICATION: 1. THE ORIGINAL TRR WILL BE FORWARDED TO DIRECTOR, RECORDS DIVISION - TO BE INCLUDED WITH THE CORRESPONDING CASE FILE. 2. A COPY OF THE PAPER TRR AND THE ATTACHMENTS WILL BE FORWARDED TO: A. THE INVESTIGATING SUPERVISOR RESPONSIBLE FOR THE INVESTIGATION, B. CIVILIAN OFFICE OF POLICE ACCOUNTABILITY (COPA), AND C. DIRECTOR, INFORMATION SERVICES DIVISION, TO ENSURE DATA ENTRY AND ATTACHMENT SCANNING INTO THE AUTOMATED TRR 1 OF 1 TRR(S)

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TACTICAL RESPONSE REPORT - INVESTIGATION /Chicago Police Department ADDRESS OF OCCURRENCE 5200 W LE MOYNE ST RD NO. INCIDENT INFORMATION CHICAGO, IL 60651 18-DEC-2020 1147 04870 JD462480 RANK MEMBER LAST NAME MEMBER FIRST NAME EMPLOYEE NO. CB NO. CHARGE FREDERICK 9161 DALE RACE SUBJECT FIRST NAME D.O.B. SUBJECT LAST NAME M.I. SEX **⊠** м 🔲 ғ UNKNOWN LIEUTENANT OR ABOVE/INCIDENT COMMANDER REVIEW MIRANDA WARNINGS GIVEN ☐ YES ☒ NO DATE/TIME LOCATION INJURIES OBSERVED

NO YES, DESCRIBE IN COMMENTS VISUAL INSPECTION CONDUCTED TYES X NO DATE/TIME LOCATION REFUSED INTERVIEW NOT CONDUCTED (Specify Reason) SUBJECT'S STATEMENT REGARDING THE USE OF FORCE □ DNA Offender not apprehended LIEUTENANT OR ABOVE/INCIDENT COMMANDER: COMMENTS M ADDITIONAL ATTACHMENTS R/ Deputy Chief responded to the scene upon notification of Officer involved shooting. C.O.P.A notified by CPIC and responded to scene. Canvass and walk-throughs conducted by IRT on scene R/ Deputy Chief relocated to Area Five detective division to conduct/continue investigation. IAD responded and conducted tests at 1504hrs. BWC video that pertained to the use of force from involved member(s) were reviewed with COPA in attendance. Recovery of member?s firearm was conducted by Forensic Division personnel, and witnessed by COPA. Involved member was provided information on the Traumatic Incident Stress program and directed to make contact. Log# 2020-5621 At the time of this report, the COPA Investigation into the use of force by the Department member continues. UNITS ON-SCENE OF THE INCIDENT: units 716, 025, 650, 181, 277 LT OR ABOVE/INCIDENT COMMANDER: I HAVE COMPLIED WITH THE DUTIES OUTLINED IN G03-02-02. BASED ON THE PRELIMINARY IN COMPLIANCE WITH DEPARTMENT POLICY AND DIRECTIVES. INFORMATION THAT I HAVE I HAVE CONCLUDED THAT THE MEMBER'S USE OF FORCE REVIEWED AND THAT WAS REQUIRES A NOTIFICATION TO THE CIVILIAN OFFICE OF NOT IN COMPLIANCE WITH DEPARTMENT POLICY AND AVAILABLE AT THE TIME OF POLICE ACCOUNTABILITY (COPA). LOG NO. OBTAINED: DIRECTIVES. THIS REPORT. THE MEMBER'S USE OF FORCE A DEADLY FORCE OR OFFICER-INVOLVED DEATH INCIDENT. 2020-5621 RESPONSE APPEARS TO BE: INVOLVED MEMBER ACTIONS RECOMMENDED? REVIEWING SUPERVISOR ACTIONS RECOMMENDED? ▼ NO YES, DESCRIBE BELOW: ☐ NO
☑ YES, DESCRIBE BELOW: INDIVIDUAL DEBRIEFING WITH REVIEW LEGAL/TRAINING BULLETIN INDIVIDUAL DEBRIEFING WITH REVIEW LEGAL/TRAINING BULLETIN SUPERVISOR SUPERVISOR STRESS REDUCTION SEMINAR STRESS REDUCTION SEMINAR REVIEW STREAMING VIDEO REVIEW STREAMING VIDEO Traumatic incident program REVIEW DEPARTMENT DIRECTIVES X OTHER: REVIEW DEPARTMENT DIRECTIVES OTHER: LT OR ABOVE/INCIDENT COMMANDER NAME (Print) STAR NO. SIGNATURE DATE/TIME COMPLETED NIEVES, ROBERTO 18-Dec-2020 1902

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