TACTICAL RESPONSE REPORT/Chicago Police Department

TRR REPORT NO. 2021-02690

INCIDENT

DATE OF INCIDENT	TIME	ADDRESS OF OCCURRENCE	LOCATION CODE	BEAT/OCCUR.	VIDEO RECORDED INCIDENT
19-SEP-2021	1055	[redacted]	090	0722	☒ BWC ☐ IN-CAR VIDEO ☐ OTHER VIDEO

BUSINESS NAME	☐ DNA	EXACT AREA WITHIN LOCATION (E.G., BASEMENT, STAIRWAY, BEDROOM)	ASSIGNMENT TYPE
		DOORWAY	☐ ON-VIEW ☐ OTHER ☐ SUPERVISOR DIRECTED ☒ CALL FOR SERVICE

EVENT NO.	RD NO.	IUCR CODE	IR NO.	CB NO.
05975	JE379439	0552	1647226	

LIGHTING	WEATHER	PATROL TYPE?	MEMBER WAS?	ASSIST UNITS ON SCENE?	INCIDENT
☐ DUSK ☐ DAYLIGHT ☐ DAWN ☐ DARKNESS ☒ ARTIFICIAL	☐ RAIN ☐ CLEAR ☐ SNOW/ICE ☐ CLOUDY ☐ FOG	☒ POLICE CAR ☐ BICYCLE ☐ MOTORCYCLE/ PAPV ☐ FOOT ☐ SQUADROL ☐ VAN/BUS ☐ OTHER: ☐ SQUAD/ PLATOON	☐ ALONE ☒ WITH PARTNER	☒ YES ☐ NO	☒ INDOOR ☐ OUTDOOR

INVOLVED MEMBER

RANK	LAST NAME	FIRST NAME	EMPLOYEE NO.	WATCH	SEX	RACE	AGE	HT.	WT.
9161	RAMBERT	BRANDON	[redacted]	2	☒ M ☐ F	1	40	510	200

DATE OF APPT.	UNIT & BEAT OF ASSIGN.	DUTY STATUS	IN UNIFORM?	TYPE OF MEMBER INJURY
22-MAY-2006	007 / 0724	☒ ON ☐ OFF	☒ YES ☐ NO	☒ None / None Apparent ☐ Minor Swelling ☐ Minor Contusion/Laceration ☐ Complaint of Substantial Pain ☐ Significant Contusion ☐ Laceration Requiring Sutures ☐ Broken/Fractured Bone(s) ☐ Heart Attack/Stroke/Aneurysm ☐ Gun Shot ☐ Fatal ☐ Other (Explain)

SUBJECT INFORMATION

☐ DNA

LAST NAME	FIRST NAME	M.I.	SEX	RACE	D.O.B.	HT.	WT.
BROWN	TURELL	D	☒ M ☐ F	BLACK	[redacted]1993	510	200

ADDRESS	TELEPHONE NO.	CONDITION
[redacted]		☐ UNK ☐ Apparently Normal ☒ Injured by Member ☐ Injured by the Member's Force ☐ Alleges Injury by Member ☐ Under Influence of Alcohol ☐ Under Influence of Drugs ☐ Mental Illness / Emotional Disorder ☐ Other (Specify) ☐ Disability (Describe)

MEDICAL TREATMENT?
☐ Refused Medical Aid ☒ Offered/EMS Requested ☐ Performed by Member ☐ Performed by CFD EMS ☐ Taken to Hospital (Specify) ☐ OTHER (Specify)

SUBJECT INJURY BY MEMBER'S USE OF FORCE?
☐ None/None Apparent ☐ Subject Alleged Injury ☐ Non-Fatal - Minor Injury ☐ Non-Fatal - Major Injury ☐ UNK ☒ Fatal

SUBJECT'S ACTIONS (Check all that apply)

☐ DNA ☐ UNK

- ☒ DID NOT FOLLOW VERBAL DIRECTION
- ☐ UNABLE TO UNDERSTAND VERBAL DIRECTION
- ☐ VERBAL THREATS
- ☐ STIFFENED (DEAD WEIGHT)
- ☐ PULLED AWAY
- ☐ FLED
- ☐ IMMINENT THREAT OF BATTERY - NO WEAPON
- ☐ PHYSICAL OBSTRUCTION
- ☐ PHYSICAL ATTACK WITHOUT WEAPON. (SPECIFY)
- ☐ HAND/ARM/ELBOW STRIKE
- ☐ KNEE/LEG STRIKE
- ☐ MOUTH/TEETH/SPIT
- ☐ PUSH/SHOVE/PULL
- ☐ GRAB/HOLD/RESTRAIN
- ☐ WRESTLE/GRAPPLE
- ☐ OTHER (DESCRIBE)
- ☐ THROWN OBJECT (DESCRIBE)
- ☒ IMMINENT THREAT OF BATTERY WITH WEAPON
- ☐ ATTEMPT TO OBTAIN MEMBER'S WEAPON
- ☐ PHYSICAL ATTACK WITH WEAPON
- ☐ USED FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM
- ☐ OTHER (DESCRIBE)

WAS SUBJECT ARMED WITH WEAPON? ☐ NO ☒ YES, DESCRIBE BELOW:
- ☐ BLUNT OBJECT (DESCRIBE)
- ☒ KNIFE/CUTTING INSTRUMENT
- ☐ SHOTGUN
- ☐ SEMI-AUTO PISTOL
- ☐ EXPLOSIVE DEVICE
- ☐ CHEMICAL WEAPON
- ☐ TASER/STUN GUN
- ☐ REVOLVER
- ☐ OTHER (DESCRIBE)
- ☐ VEHICLE
- ☐ RIFLE

☐ WEAPON/OBJECT PERCEIVED AS:

DID THE SUBJECT COMMIT AN ASSAULT OR BATTERY AGAINST THE INVOLVED MEMBER PERFORMING A POLICE FUNCTION? ☐ NO ☒ YES

SUBJECT ACTIVITY
Drug-Related? ☐ YES ☒ NO
Gang-Related? ☐ YES ☒ NO

WEAPON USE:
- ☐ DNA
- ☒ Used - Attempt to Attack Member
- ☐ Obtained Member's Weapon
- ☐ Possessed
- ☐ Used - Attacked Member
- ☐ Member at Gunpoint
- ☐ Displayed, Not Used
- ☐ Member Shot/Shot At

TYPE OF ACTIVITY
- ☐ Ambush - No Warning
- ☒ Disturbance - Domestic
- ☐ Person with a Gun
- ☐ Disturbance - Riot/Mob Action/Civil Disorder
- ☐ Disturbance - Other
- ☐ Processing/Transporting/Guarding Arrestee
- ☐ Traffic Stop
- ☐ Investigatory Stop
- ☐ Mental Health Related Incident
- ☐ Other - Describe in Narrative
- ☐ Pursuing/Arresting Subject

MEMBER 'S RESPONSE (Check all that apply)

☐ DNA ☐ UNK

REASON FOR RESPONSE?
- ☒ Defense of Self
- ☒ Defense of Department Member
- ☒ Defense of Member of Public
- ☒ Overcome Resistance or Aggression
- ☐ Stop Self-Inflicted Harm
- ☐ Fleeing Subject
- ☒ Subject Armed with Weapon
- ☐ Unintentional
- ☐ Other (Describe)
- ☐ Ordered by Supervisor — Name ____ Star No. ____

FORCE MITIGATION EFFORTS

- ☒ MEMBER PRESENCE
- ☐ ZONE OF SAFETY
- ☒ MOVEMENT TO AVOID ATTACK
- ☐ TACTICAL POSITIONING
- ☐ NONE
- ☒ VERBAL DIRECTION/ CONTROL TECHNIQUES
- ☐ SPECIALIZED UNITS
- ☒ ADDITIONAL UNIT MEMBERS
- ☐ OTHER

CONTROL TACTICS

- ☐ ESCORT HOLDS
- ☐ CONTROL INSTRUMENT
- ☐ HANDCUFFS/PHYSICAL RESTRAINTS
- ☐ WRISTLOCK
- ☐ PRESSURE SENSITIVE AREAS
- ☐ ARMBAR
- ☐ OTHER

RESPONSE WITHOUT WEAPONS

- ☐ OPEN HAND STRIKE
- ☐ KICKS
- ☐ TAKE DOWN
- ☐ PUSH/PHYSICAL REDIRECTION
- ☐ ELBOW STRIKE
- ☐ OTHER
- ☐ CLOSED HAND STRIKE/ PUNCH
- ☐ KNEE STRIKE

RESPONSE WITH WEAPON USE

- ☐ OC/CHEMICAL WEAPON
- ☐ OC/CHEMICAL WEAPON W/ AUTHORIZATION*
- ☐ LRAD W/ AUTHORIZATION*
- ☐ TASER
- ☐ CANINE
- ☐ BATON/EXPANDABLE BATON
- ☐ LESS LETHAL SHOTGUN (DESCRIBE BELOW)
- ☐ OTHER IMPACT MUNITIONS (DESCRIBE BELOW)
- ☐ REVOLVER
- ☒ SEMI-AUTO PISTOL
- ☐ RIFLE
- ☐ SHOTGUN
- ☐ OTHER

*AUTHORIZED BY (NAME) , RANK , STAR NO. , UNIT NO.

WAS ANY REPORTABLE FORCE USED AGAINST THE SUBJECT WHILE HANDCUFFED OR OTHERWISE IN PHYSICAL RESTRAINTS?
☒ NO ☐ YES IF YES, DESCRIBE SUBJECT'S ACTIONS AND MEMBER'S RESPONSE IN THE NARRATIVE SECTION.

INVOLVED IN A PURSUIT?
☒ NO ☐ FOOT ☐ VEHICLE ☐ OTHER

WEAPON USE

☐ DNA

WEAPON TYPE:	NO. OF DISCHARGES OF THE WEAPON.	WEAPON SERIAL NO.	WEAPON CERT. NO.
☐ CHEMICAL WEAPON ☒ SEMI-AUTO PISTOL ☐ SHOTGUN ☐ TASER ☐ REVOLVER ☐ OTHER ☐ RIFLE	3	[redacted]	

DID THIS WEAPON CONTRIBUTE TO A SUBJECT INJURY?	DID THE DISCHARGE RESULT IN A SELF-INFLICTED INJURY?	WAS SUBJECT VEHICLE USE AS A WEAPON?
☒ YES ☐ NO ☐ UNK	☒ NO ☐ YES-SUBJECT ☐ YES-MEMBER	☒ NO ☐ YES - AGAINST MEMBER ☐ YES - AGAINST OTHER PERSON

WAS DISCHARGE ONLY TO DESTROY/DETER AN ANIMAL?	WAS THIS AN UNINTENTIONAL DISCHARGE DURING A NON-CRIMINAL INCIDENT?	PERSON/OBJECT(S) STRUCK BY THE DISCHARGE OF MEMBER'S WEAPON (CHECK ALL THAT APPLY):
☐ YES ☒ NO	☐ YES ☒ NO	☒ SUBJECT ☐ OTHER PERSON ☐ DEPARTMENT MEMBER ☐ ANIMAL ☐ VEHICLE ☐ NONE ☐ UNKNOWN ☐ OTHER OBJECT

TASER USE ONLY

TASER CARTRIDGE ID NO.(S)	PROPERTY INVENTORY NO.	CARTRIDGES DISCHARGED	ADDITIONAL ENERGY CYCLES	CONTACT STUN	SPARK DISPLAY
		☐ 1 ☐ 2 ☐ DNA ☐ OTHER	☐ TRIGGER ☐ DNA ☐ 1 ☐ 2 ☐ OTHER ☐ ARC ☐ DNA ☐ 1 ☐ 2 ☐ OTHER	☐ 1 ☐ 2 ☐ DNA ☐ OTHER	☐ 1 ☐ 2 ☐ DNA ☐ OTHER

FIREARM DISCHARGE ONLY

WHO FIRED FIRST SHOT?	TOTAL NO. OF SHOTS MEMBER FIRED	WAS FIREARM RELOADED DURING INCIDENT?	MAKE/ MANUFACTURER	MODEL	DID MEMBER FIRE AT A VEHICLE?
☒ MEMBER ☐ OTHER (Specify) ☐ OFFENDER	3	☐ YES ☒ NO	SPRINGFIELD ARMORY,GEN	XD45	☒ NO ☐ YES

For Review Panel Review

NOTIFICATIONS AND NARRATIVE

NOTIFICATIONS (ALL INCIDENTS): ☒ IMMEDIATE SUPERVISOR ☐ DISTRICT OF OCCURRENCE | **NOTIFICATIONS (WEAPONS DISCHARGE AND DEADLY FORCE):** ☒ OEMC ☒ CPIC

VIEWED BEFORE COMPLETING REPORT: ☐ BWC ☐ IN-CAR VIDEO ☐ OTHER ☒ NONE

NARRATIVE (DESCRIBE WITH SPECIFICITY, (1) THE USE OF FORCE INCIDENT, (2) THE SUBJECT'S ACTIONS OR OTHER CIRCUMSTANCES NECESSITATING THE FORCE USED, AND (3) THE INVOLVED 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.)

REPORTING MEMBER (Print Name)	RANK/TITLE CODE	STAR/EMPLOYEE NO.	SIGNATURE
RAMBERT, BRANDON	11	16391	[redacted]

REVIEWING SUPERVISOR

TYPE OF SUBJECT INJURY ☐ None / None Apparent ☐ Minor Swelling ☐ Minor Contusion ☐ Minor Laceration/Abrasion ☐ Complaint of Substantial Pain ☐ Significant Contusion ☐ Laceration Requiring Sutures ☐ Broken/Fractured Bone(s) ☐ Potential Life-Threatening ☐ Gun Shot ☐ Other (Explain) ☒ Fatal

INJURY LOCATION ☐ Leg: ☐ Left ☐ Right ☐ Arm: ☐ Left ☐ Right ☐ Head/Neck ☒ Torso ☐ Back ☐ Other (Describe)

WITNESSES

☒ UNK

LAST NAME	FIRST NAME	M.I.	SEX ☐ M ☐ F	RACE	DATE OF BIRTH

ADDRESS: CHICAGO, IL | TELEPHONE NO. | WITNESS INTERVIEW ☐ INTERVIEWED ☐ NOT AVAILABLE ☐ REFUSED ☐ OTHER (Specify)

WITNESS STATEMENT ☐ ADDITIONAL WITNESSES

REVIEWING SUPERVISOR: COMMENTS (DOCUMENT ANY OTHER INCIDENT INFORMATION, OBSERVATIONS OR OTHER ACTIONS TAKEN, INCLUDING EFFORTS AND NEGATIVE RESULTS TO IDENTIFY AND INTERVIEW WITNESSES, THAT ARE NOT ALREADY CAPTURED IN TRR FIELDS.)

R/SGT RESPONDED TO INCIDENT AND ON SCENE. SCENE SECURED. DETECTIVE DIVISION IRT ARRIVED ON SCENE AND WILL INTERVIEW ANY AND ALL WITNESSES. ALL REQUIRED NOTIFICATIONS MADE. R/SGT ENSURED THAT GENERAL OFFENSE CASE REPORT WAS COMPLETED FOR THIS INCIDENT. EVIDENCE TECHNICIAN REQUESTED, ARRIVED AND PROCESSED SCENE.

SUPERVISOR ON-SCENE RESPONSE? ☐ NO ☒ YES | EVIDENCE TECHNICIAN? ☐ NOTIFIED ☒ RESPONDED ☐ DNA

ATTACHMENTS: ☐ CASE REPORT ☐ ARREST REPORT ☐ SUPPLEMENTARY REPORT ☐ INVENTORY ☐ IOD REPORT ☐ TASER DOWNLOAD ☐ OTHER

REVIEWING SUPERVISOR:

☒ **I HAVE COMPLIED WITH THE DUTIES OUTLINED IN G03-02-02.**

☒ **I DID NOT USE REPORTABLE FORCE OR ORDER THE USE OF REPORTABLE FORCE DURING THIS INCIDENT.**

☒ **LOG NUMBER OBTAINED FROM THE CIVILIAN OFFICE OF POLICE ACCOUNTABILITY (COPA).**

LOG NO. OBTAINED. 2021-003709

☒ **I HAVE REVIEWED THIS TACTICAL RESPONSE REPORT AND AFFIRM THAT THE REPORT IS LEGIBLE AND COMPLETE.**

REVIEWING SUPERVISOR NAME (Print)	RANK/TITLE CODE	STAR NO.	SIGNATURE	DATE/TIME COMPLETED
CANDELARIA, JUAN	9	1194	[redacted]	19-SEP-2021 1919

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, ADMINISTRATIVE SUPPORT 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. DEPUTY CHIEF, STRATEGIC INITIATIVES DIVISION, TO ENSURE DATA ENTRY AND ATTACHMENT SCANNING INTO THE AUTOMATED TACTICAL RESPONSE REPORT (A-TRR) APPLICATION.**

Force Review Panel Review

TACTICAL RESPONSE REPORT-INVESTIGATION/Chicago Police Department

FRD TRACKING NO. 2021-02690

INCIDENT INFORMATION

DATE OF INCIDENT	TIME	ADDRESS OF OCCURRENCE	EVENT NO.	RD NO.
19-SEP-2021	1055	[redacted]	05975	JE379439

RANK	MEMBER LAST NAME	MEMBER FIRST NAME	EMPLOYEE NO.	CB NO.	CHARGE
9161	RAMBERT	BRANDON	[redacted]		

SUBJECT LAST NAME	SUBJECT FIRST NAME	M.I.	SEX	RACE	D.O.B.
BROWN	TURELL	D	☒ M ☐ F	BLK	[redacted]1993

LIEUTENANT OR ABOVE/INCIDENT COMMANDER REVIEW

MIRANDA WARNINGS GIVEN ☐ YES ☒ NO **DATE/TIME** _____ **LOCATION** _____

VISUAL INSPECTION CONDUCTED ☒ YES ☐ NO **DATE/TIME** 19-SEP-2021 00(**LOCATION** [redacted] **INJURIES OBSERVED** ☐ NO ☒ YES, DESCRIBE IN COMMENTS

SUBJECT'S STATEMENT REGARDING THE USE OF FORCE ☐ DNA ☐ REFUSED ☒ INTERVIEW NOT CONDUCTED (Specify Reason)

(Attempt to interview the subject of any reportable use of force, solely about the use of force incident, and record the subject's statement regarding the use of force.)

Subject sustained fatal injuries

LIEUTENANT OR ABOVE/INCIDENT COMMANDER: COMMENTS ☒ ADDITIONAL ATTACHMENTS

(Document any investigatory information or other observations or actions taken that are not already captured in TRR-I fields.)

R/Cmdr notified at approx 1143 hrs of a shots fired by the police incident with hits.
R/Cmdr proceeded to the scene and learned that the offender had been pronounced at 1135 hrs. R/Cmdr observed the subject to have two apparent gunshot wounds to his torso.
R/Cmdr assumed the duties of the OCIC at approx 1300 hrs. BIA was previously notified and responded to U of C Hospital at approx 1256 hrs.
R/Cmdr reviewed the (2) Body Worn Cameras belonging to the involved officers. R/Cmdr viewed the camera belonging to P.O. Rambert #16391 for the time period from 1101-1105 hrs and viewed the camera belonging to P.O. Roman #19361 for the hours between 1058-1106 hrs.
R/Cmdr conducted a walk-thru w/ COPA at approx 1538 hrs.
R/Cmdr conducted a Public Safety walk-thru w/ P.O. Roman at 1625 hrs.
R/Cmdr conducted a Public Safety walk-thru w/ P.O. Rambert at 1637 hrs.
R/Cmdr witnessed the recovery of the discharging members firearm by Forensics Division Personnel at

COMMENTS CONTINUED ON ATTACHED ADDITIONAL INFORMATION FORM

UNITS ON-SCENE OF THE INCIDENT: 712, 711, 720, 723, Car 41, 922, 706H, 913, 735

WAS AN INVESTIGATION EXTENSION REQUESTED? ☐ NO ☐ YES, DENIED ☐ YES, APPROVED BY: _____ STAR NO.: _____

LT OR ABOVE/INCIDENT COMMANDER:

☒ I HAVE COMPLIED WITH THE DUTIES OUTLINED IN G03-02-02.

☒ I HAVE CONCLUDED THAT THE MEMBER'S USE OF FORCE REQUIRES A NOTIFICATION TO THE CIVILIAN OFFICE OF POLICE ACCOUNTABILITY (COPA). LOG NO. OBTAINED: 2021-0003709

☒ I DID NOT USE REPORTABLE FORCE OR ORDER THE USE OF REPORTABLE FORCE DURING THIS INCIDENT.

BASED ON THE PRELIMINARY INFORMATION THAT I HAVE REVIEWED AND THAT WAS AVAILABLE AT THE TIME OF THIS REPORT, THE MEMBER'S USE OF FORCE RESPONSE APPEARS TO BE:

☐ IN COMPLIANCE WITH DEPARTMENT POLICY AND DIRECTIVES.

☐ NOT IN COMPLIANCE WITH DEPARTMENT POLICY AND DIRECTIVES.

☒ A DEADLY FORCE OR OFFICER-INVOLVED DEATH INCIDENT.

INVOLVED MEMBER ACTIONS RECOMMENDED?

☒ NO ☐ YES, DESCRIBE BELOW:

☐ INDIVIDUAL DEBRIEFING WITH SUPERVISOR ☐ REVIEW LEGAL/TRAINING BULLETIN
☐ REVIEW STREAMING VIDEO ☐ STRESS REDUCTION SEMINAR
☐ REVIEW DEPARTMENT DIRECTIVES ☐ OTHER: _____

REVIEWING SUPERVISOR ACTIONS RECOMMENDED?

☒ NO ☐ YES, DESCRIBE BELOW:

☐ INDIVIDUAL DEBRIEFING WITH SUPERVISOR ☐ REVIEW LEGAL/TRAINING BULLETIN
☐ REVIEW STREAMING VIDEO ☐ STRESS REDUCTION SEMINAR
☐ REVIEW DEPARTMENT DIRECTIVES ☐ OTHER: _____

LT OR ABOVE/INCIDENT COMMANDER NAME (Print)	RANK/TITLE CODE	STAR NO.	SIGNATURE	DATE/TIME COMPLETED
SMITH, JARROD L	COMMAND	269	[redacted]	19-Sep-2021 2215

Force Review Panel Review

TACTICAL RESPONSE REPORT-INVESTIGATION/Chicago Police Department

FRD TRACKING NO. 2021-02690

INCIDENT INFORMATION

DATE OF INCIDENT	TIME	ADDRESS OF OCCURRENCE	EVENT NO.	RD NO.
19-SEP-2021	1055	[redacted]	05975	JE379439

RANK	MEMBER LAST NAME	MEMBER FIRST NAME	EMPLOYEE NO.	CB NO.	CHARGE
9161	RAMBERT	BRANDON	[redacted]		

SUBJECT LAST NAME	SUBJECT FIRST NAME	M.I.	SEX	RACE	D.O.B.
BROWN	TURELL	D	☒ M ☐ F	BLK	[redacted]-1993

LEVEL 3 REPORTABLE USE OF FORCE INCIDENT SUPPLEMENTAL

TYPE OF LEVEL 3 REPORTABLE USE OF FORCE: ☒ DEADLY FORCE, FIREARMS DISCHARGE ☐ DEADLY FORCE, CHOKEHOLD ☐ DEADLY FORCE, OTHER
☐ DEADLY FORCE, IMPACT WEAPON STRIKE TO THE HEAD OR NECK ☐ HOSPITAL ADMISSION ☐ FORCE CAUSED DEATH TO A PERSON

LIST ALL THE TACTICAL RESPONSE REPORTS (TRR) FOR THE INCIDENT (INCLUDING TRRS OF MEMBERS WHO DID NOT ENGAGE IN A LEVEL 3 REPORTABLE USE OF FORCE BUT COMPLETED A TRR FOR A REPORTABLE USE OF FORCE FOR THE INCIDENT):

2021-02690			

BASED ON THE PRELIMINARY INFORMATION THAT HAS BEEN REVIEWED AND THAT WAS AVAILABLE AT THE TIME OF THIS REPORT, THE FOLLOWING INFORMATION IS PROVIDED FOR THE LEVEL 3 USE OF FORCE INCIDENT REFERENCED ABOVE:

WAS MEMBER ENGAGED IN LEVEL 3 FORCE ON-DUTY?	☐ NO ☒ YES ☐ UNKNOWN	COMMENTS:
INVOLVED A MENTAL HEALTH COMPONENT?	☐ NO ☐ YES ☒ UNKNOWN	COMMENTS:
MEDICAL AID PROVIDED?	☐ NO ☒ YES ☐ UNKNOWN	COMMENTS:
CHOKEHOLD USED?	☒ NO ☐ YES ☐ UNKNOWN	COMMENTS:
CAROTID ARTERY RESTRAINT USED?	☒ NO ☐ YES ☐ UNKNOWN	COMMENTS:
WAS THERE AN INTENTIONAL BATON STRIKE TO HEAD OR NECK?	☒ NO ☐ YES ☐ UNKNOWN	COMMENTS:
WARNING SHOT FIRED?	☒ NO ☐ YES ☐ UNKNOWN	COMMENTS:
FIREARM DISCHARGED AT A PERSON WHO WAS A THREAT ONLY TO SELF?	☒ NO ☐ YES ☐ UNKNOWN	COMMENTS:
FIREARM DISCHARGED SOLEY IN DEFENSE OR PROTECTION OF PROPERTY?	☒ NO ☐ YES ☐ UNKNOWN	COMMENTS:
FIREARM DISCHARGED INTO A CROWD?	☒ NO ☐ YES ☐ UNKNOWN	COMMENTS:
FIREARM DISCHARGED AT OR INTO A BUILDING?	☒ NO ☐ YES ☐ UNKNOWN	COMMENTS:
FIREARM DISCHARGED AT OR INTO A MOVING MOTOR VEHICLE?	☒ NO ☐ YES ☐ UNKNOWN	COMMENTS:
FIREARM DISCHARGED FROM A MOVING MOTOR VEHICLE?	☒ NO ☐ YES ☐ UNKNOWN	COMMENTS:

ADDITIONAL INFORMATION:

Force Review Panel Review

REQUIRED NOTIFICATION TO:	NAME:	EMPLOYEE / STAR NO.	DATE/TIME COMPLETED
☒ COPA ☒ CPIC ☐ NONE	SMITH, JARROD L	269	COMMANDER

LT OR ABOVE/INCIDENT COMMANDER NAME (Print)	RANK/TITLE CODE	STAR NO.	SIGNATURE	DATE/TIME COMPLETED
SMITH, JARROD L		269		19-Sep-2021 2215

CLEARNET - ADDITIONAL INFORMATION

CHICAGO POLICE DEPARTMENT

APPLICATION NAME
TACTICAL RESPONSE REPORT

DATE OF INCIDENT	TIME	REPORT NO	EVENT NO.	RD NO.	BEAT OF OCCUR.
19-SEP-2021	1055	2021-02690	05975	JE379439	0722

ADDRESS OF OCCURENCE	CB NO.	IUCR
[redacted]		0552

MEMBER RANK	MEMBER LAST NAME	MEMBER FIRST NAME
9161	RAMBERT	BRANDON

SUBJECT LAST NAME	SUBJECT FIRST NAME	
BROWN	TURELL	

INVESTIGATION COMMENTS

approx 1724 hrs.
R/Cmdr provided the Traumatic Incident Stress Management Program Notification to officers and discharging member notified of the required Administrative Duties assignment.
Investigation by COPA continues regarding the members use of force under LOG# 2021-0003709.

Force Review Panel Review