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	DATE OF INCIDENT	TIME					LO	CATION COD		EAT/OC	CUR.	VIDEO REC		
	23-FEB-2023	2253	5701 S C		T#: 051 CHICAGO) 60629	09	95J	0	813				AR VIDEO
	BUSINESS NAME			S CICERO AVE, APT#: 051 CHICAGO, IL 60629 EXACT AREA WITHIN LOCATION (E.G., BASEMENT, STAIRWAY, BEDROOM)					_	0813 OTHER VIDEO				
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INCIDENT		55.40	BA	AGGAGE CLAIM	1								CALL FOR	R SERVICE
	EVENT NO.	RD NO.			IUCR CODE	IR NO.				СВ	NO.			
≤	2305500426	JG163707	7						_					
	LIGHTING DUSK		RAIN SNOW/ICE		E? □ BICYCLE AR □ MOTORC			SQUAD/ PLATOON		BER WA LONE	NS?	ASSIST UNITON SCENE?		ENT NDOOR
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٥.,	RANK LAST NAME			FIRST NAME		EMF	PLOYEE NO.	W	ATCH		RACE	AGE	HT.	WT.
Ш К Ш К	9161 MONROE			SHAWN				1		X M	1	59	508	238
INVOLVED MEMBER	DATE OF APPT. UNIT & BE	AT OF ASSIGN. DUT	Y STATUS	IN UNIFORM?	TYPE OF MEM	BER INJURY	Minor Con	ntusion/Lacera			eration Re	equiring Sutur		n Shot
ΝŽ	06-FEB-1995 051	1 1			None / Nor	e Apparent	Complaint	of Substantia	l Pain	Brok	en/Fractu	ured Bone(s)	🗖 Fat	
		1214			Minor Swe		<u> </u>	t Contusion		_ Hear		Stroke/Aneury		
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	HERNANDEZ		JAII	ME			X		HITE HI		30-JUN		507	165
SUBJECT FORMATION	ADDRESS	TELEPHON	E NO.		N DUNK		Not by the Mer	mber's Force			nfluence Other (S		Disability	(Describe)
SUBJECT FORMATIC			I		by Member			Emotiona				peeny)		
Ъ	MEDICAL TREATMENT?	Perform	ned by Mem	ber 🔀 Taken	to Hospital (Speci	fy) 🔲 OTHE	ER (Specify)	SUBJ	ECT IN.	JURY BY	Y MEMBE	ER'S USE OF	FORCE?	
ΪĽ	Refused Medical Aid	equested	ned by CFD	EMS HOLY CR	OSS HOSPITAL					ne Appar Ileged In		Non-Fatal - Non-Fatal -		
	DID NOT FOLLOW	PHYSICAL ATTA	CK WITHO		OWN OBJECT (D		WAS SU	BJECT ARME						
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ACTION at apply)		GRAB/HOLI	D/RESTRAI	USED FORCE LIKELY TO CAUSE				T BEE	R CAN					
at a		WRESTLE/C			ATH OR GREAT B	ODILY HARM		RGEIVED AS.						
T.S.=	BATTERY - NO WEAPON		,		IER (DESCRIBE)	LED O	WEAPO							
k all	DID THE SUBJECT COMMIT								Attack	d - Attempt to ck Member Dobtained Member's Weapon				
SUBJECT'S ACTIO (Check all that apply)	BATTERY AGAINST THE INVO PERFORMING A POLICE FUN	OLVED MEMBER		Drug-Related?	Gang-F	telated?		ossessed	-	- Attacke	ed Memb		ber at Gun	
ดะ	TYPE OF ACTIVITY		YES C	YES 🗶 NO	р ГПР									
						es 🗶 No		Displayed, Not	Useu				ber Shot/S	
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			NOTIFICATIO	NS AND NARRATIV	/E				
NOTIFICATIONS (ALL INCIDE	NTS): 🗶 IMMEDIATE S	SUPERVISOR 🗶	DISTRICT OF OCCURRI	ENCE NOTIFICATIONS (WEAPONS DISCHARGE AND DEADLY F	ORCE): X OEMC			
VIEWED BEFORE COMF		BWC	IN-CAR VIDEO	OTHER NONE					
USED, AND (3) THE INVO MEMBER WILL NOT CO INCIDENTS RESULTING WHILE ON ROUTINE PA DRINKING BEER AND I RECOGNIZE THE HOM FINGER. OFFICER MOI AIRPORT. AFTER NEG WHICH TIME OFFENDE MONROE APPROCHEE BODY LANAUAGE KNO THE RADIO HE HAD IN ASSISTANT FOR REMO	DLVED MEMBER'S RE WPLETE THE NARRA IN DEATH.) ATROL AT MIDWAY B MESSING WITH PASS ELESS MAN AND ASS INFORMATION OF THE OF INFORMATION OF INFORMATION OF INFORMATION	SPONSE, INCLI TIVE SECTION I AGGAGE CLAIM ENGERS WHILE CED HIM TO LEA HIS SIGWAY A CER MONROE VE AND DISTRI ON OF ATTACK ME OF THE COI IS MAN OUT TH	UDING FORCE MITIG FOR ANY FIREARM I WAITING FOR THEI AVE THE AIRPORT. T IND KICKED HIS BAG TOLD HIM THAT HE (UPTIVE AS HE RETR E TO ASK HIM TO LE ING PEOPLE, AT WH NFRONTATION. AT T E AIRPORT AND WH	ATION EFFORTS AND S DISCHARGE INCIDENTS EST EMPLOYEE INFORM IR LUGGAGE IN THE BAY HE HOMELESS MAN RE AWAY FROM HIM HOPP CAN NOT DRINK IN THE IVED HIS BEER AND TH AVE THE AIRPORT HE ICH TIME OFFICER MON HIS TIME OFFICER MON EN OFFICER MONROE F	ONS OR OTHER CIRCUMSTANCES SPECIFIC TYPES AND AMOUNT OF (WITH OR WITHOUT INJURY) OR II MED PO MONROE THAT A KNOWN GGAGE AREA. UPON ARRIVAL TO SLATED TO PO (FUCK YOU NIGGA EING HE WOULD MOVE TO RETRIV AIRPORT AND THEN MOVED HIS E EN THREW IT AT OFFICER MONRO FEARED OF RECEIVING A BATTER NROE STRUCK THE HOMELESS M/ NOE DROVE THE SIGWAY TO THE RETURNED TO THE SCENE THEIR CENE FIRE TRANSPORTED TO HO	FORCE USED. THE IN NANY USE OF FORCE THE SCENE PO DID AND GAVE PO THE /E HIS BAG AND LEA BEER OUT OF HIS AF DE. AT THIS TIME AS Y BY THE HOMELES AN ABOUT THE HEAT E POLICE POST FOR WAS BLOOD ON THI	INVOLVED CE N WAS FUCK YOU VE THE REA AT OFFICER S MAN D WITH E FLOOR		
REPORTING MEMBER (P	rint Name)		RANK/TITLE CODE	STAR/EMPLOYEE NO.	SIGNATURE				
MONROE, SHAWN			11	18901					
			REVIEWIN	IG SUPERVISOR					
TYPE OF SUBJECT INJURY				Potential Life-Threatening		ad/Neck 🔲 Other (Desc	ribe)		
	Minor Laceration/Abras	ion 🗶 Lacerati al Pain 🗌 Broken/I		Gun Shot Dother (Explain) Leg: Left Right Tor Arm: Left Right Bad				
			FIRST NAME		M.I. SEX RACE	DATE OF BIRTH			
			UNK						
				TELEPHONE NO.			HER (Specify)		
ADDRESS O UNKNOWN AV WITNESS STATE	E, APT#: UNK UNK, MENT								
-	ONTINUED ON ATTAC	HED ADDITION	IAL INFORMATION F	ORM**	L				
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 WAS ABLE TO VIEW THE CHICAGO DEPARTMENT OF AVIATION VIDEO OF THIS INCIDENT. THE VIDEO SHOWS THE HOMELESS PERSON SEATED ON THE FLOOR WITH A CAN OF BEER WHEN OFFICER MONROE APPROACHES HIM AN ENGAGES IN CONVERSATION. OFFICER MONROE THEN STEPS OFF OF HIS SEGWAY AND KICKS THE HOMELESS PERSONS' BAG AWAY FROM HIM. OFFICER MONROE THEN STRIKES THE HOMELESS PERSON OVER THE HEAD WITH HIS RADIO WHILE HE IS STILL SEATED SEEMINGLY UNPROVOKED. THE HOMELESS PERSON DID NOT SEEM TO POSE A THREAT TO OFFICER MONROE AT THE TIME HE WAS STRUCK.									
SUPERVISOR ON-SCEN	IE RESPONSE?	NO XY	ES EVIDENCE	TECHNICIAN? 🗶 NO	TIFIED RESPONDED	DNA DNA			
ATTACHMENTS: CA	SE REPORT	REST REPORT	SUPPLEMENTARY		RY I IOD REPORT TASER D		HER		
I DID NOT USE REF	<u>R:</u> WITH THE DUTIES O ORTABLE FORCE O CE DURING THIS INC	R ORDER THE L		DG NUMBER OBTAINED F POLICE ACCOUNTABI		3 NO. OBTAINED. 2023-0000787			
I HAVE REVIEWED	THIS TACTICAL RES	PONSE REPOR	T AND AFFIRM THAT	THE REPORT IS LEGIB	LE AND COMPLETE.				
REVIEWING SUPERVISC WARE, TIMOTHY	R NAME (Print)	RA 9	NK/TITLE CODE ST			DATE/TIME COMPL 24-FEB-2023 0418			
WARE, TIMOTHY 9 2331 24-FEB-2023 0418 DISTRIBUTION OF TRR: IF A PAPER TRR WAS COMPLETED DUE TO AN UNAVAILABILITY OF THE AUTOMATED TACTICAL RESPONSE REPORT APPLICATION: 1. 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. CPD-11.377 (Rev. 9/20) Page 2									

TAC		L RESPON	ISE REPOR	RT-INVEST	IGATION/Ch	icago Police	e Depa	artment FRD TRA	CKING NO. 2023-00536
	DATE OF	INCIDENT	TIME	ADDRESS OF OCC	URRENCE		EVENT N	NO.	RD NO.
μĘ	23-FEB-2	2023	2253	5701 S CICERO A	VE, APT#: 051 CHICAGO), IL 60629	2305500	0426	JG163707
MAT	RANK 9161	MEMBER LAST MONROE	NAME	MEMBER	R FIRST NAME	EMPLOYE	EE NO. CB	3 NO.	CHARGE
INCIDENT INFORMATION				SHAWN					
Ξ	SUBJECT	LAST NAME		SUBJ	ECT FIRST NAME		M.I.		RACE D.O.B.
	HERNAN	IDEZ		JAIN	E				WWH 1972
			LI	EUTENANT OF	R ABOVE/INCIDE	ENT COMMANDE	R REVI	IEW	
MIRA	NDA WAR	NINGS GIVEN	YES 🕅 NO	DATE/TIME		LOCATI	ION		
VISUA								<u>IN</u> ,	JURIES OBSERVED
			RDING THE USE O		Пр		ED 🛛		NO YES, DESCRIBE IN COMMENTS CONDUCTED (Specify Reason)
(Atten	npt to inte	rview the subject	of any reportable	use of force, solel	y about the use of fo	orce incident, and reco			arding the use of force.)
Subj	ect not pl	aced into custoc	ly. Subject was t	aken to hospital f	or treatment for sus	stained injuries.			
			ENT COMMANDER		tions taken that are r	not already captured i	in TPP-I fi		ADDITIONAL ATTACHMENTS
R/Lt	. read the	e case report and	d Tactical Respo	nse Report as we	II as spoke to Sgt. V	Nare #2331 regardir	ng this inc	cident. R/Lt. was un	able to interview or conduct
									nt. The involved member
									eras. Per Sgt. Ware, video age of the incident from the
airpo	ort camer	a system, Sgt. V	Vare made the de	etermination to ini	tiate a log number	as he did not see an	nple justif	fication for Officer M	onroe striking the subject
		 Based on the er investigation. 		ded at the time of	this report, the R/L	t. agrees with Sgt. V	Vare's de	ecision to obtain a log	g number as this incident
1090		or invoorigation.							
	ON-SCE	NE OF THE INCID	DENT:						
<u> </u>					ΈS, DENIED ΠΥ				
			NSION REQUESTE			ES, APPROVED BY:			STAR NO.:
_		NCIDENT COMM							
			E DUTIES OUTLIN		BASED ON THE PR			NCE WITH DEPARTM	ENT POLICY AND DIRECTIVES.
			THE MEMBER'S US		INFORMATION THA				
			COPA). LOG NO. C		REVIEWED AND TH AVAILABLE AT THE		<u>T IN COM</u> RECTIVES.		RTMENT POLICY AND
2	023-00	00787			THIS REPORT, THE MEMBER'S USE OF				NVOLVED DEATH INCIDENT.
			E FORCE OR OR		RESPONSE APPEA		ENDETT		
	OF REPOR	TABLE FORCE D	URING THIS INCI	DENT.					
	_		RECOMMENDED?					CTIONS RECOMMEND	DED?
_		YES, DESCRIBE I	_					_	
	NDIVIDUA SUPERVIS	AL DEBRIEFING V SOR		IEW LEGAL/TRAIN	IING BULLETIN	INDIVIDUAL DEB	RIEFING		W LEGAL/TRAINING BULLETIN
		TREAMING VIDE	D STR	ESS REDUCTION	SEMINAR		MING VIDE	EO STRE	SS REDUCTION SEMINAR
	REVIEW D	EPARTMENT DIR		HER:					R:
					E CODE _ STAR NO.				
				1		SIGNATURE			DATE/TIME COMPLETED
		D, JOHN P		LIEUTI	ENAN 305				24-Feb-2023 0539

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REQUIRED NOTIFICATION TO:	NAME:			EMPLOYEE / STAR NO.	DATE/TIME COMPLETED
LT OR ABOVE/INCIDENT COMMANDER NAME (Print)	RANK/TITLE CODE	STAR NO.	SIGNATURE		DATE/TIME COMPLETED

DATE OF INCIDENT

TIME

PN	DATE OF INCIDENT TIME			ADDRESS OF OCCURRENCE				EVENT NO.				RD NO.	
INCIDENT INFORMATION	RANK	MEMBER LAST NA	ME	MEMBE	MEMBER FIRST NAME			EE NO. CB NO.			CHARGE		E
INFO	SUBJECT L	AST NAME	BJECT FIRST NAI	ME	-		M.I.	SEX	RACE		D.O.B.		
			LEVEL	3 REPORTA	BLE USE O	F FORCE INCI	DENT SU	PPL	EMENT	AL			
TYPE OF LEVEL 3 REPORTABLE USE OF FORCE: Deadly FORCE, FIREARMS DISCHARGE Deadly FORCE, CHOKEHOLD Deadly FORCE, OTH 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):												NA	
						ED AND THAT W DRCE INCIDENT					HIS RI	EPOR	T, THE
-	1EMBER E ON-DU	ENGAGED IN L TY?	EVEL 3		YES KNOWN	COMMENTS:							
INVOL	/ED A ME	ENTAL HEALTH	I COMPONENT?		YES KNOWN	COMMENTS:							
MEDIC	AL AID P	ROVIDED?			YES KNOWN	S COMMENTS:							
СНОК	EHOLD U	SED?				ES COMMENTS:							
CARO	TID ARTE	RY RESTRAIN	T USED?										
		N INTENTIONAL	BATON				IMENTS:						
WARN	ING SHO	T FIRED?			NO YES COMMENTS:								
		HARGED AT A ONLY TO SEL	PERSON WHO .F?		YES KNOWN	S COMMENTS:							
		HARGED SOLE ON OF PROPER	Y IN DEFENSE		YES KNOWN	COMMENTS:							
FIREA	RM DISCI	HARGED INTO	A CROWD?		YES KNOWN	COMMENTS:							
FIREAI BUILDI		HARGED AT OI	R INTO A		YES KNOWN	COMMENTS:							
		HARGED AT OI R VEHICLE?	R INTO A		YES KNOWN	COMMENTS:							
	RM DISCI R VEHICI	HARGED FROM LE?	A MOVING		YES KNOWN	COMMENTS:							
ADDIT	ONAL IN	FORMATION:											

TACTICAL RESPONSE REPORT-INVESTIGATION/Chicago Police Department FRD TRACKING NO.

ADDRESS OF OCCURRENCE

EVENT NO.

RD NO.

CLEARNET - ADDITIONAL INFORMATION

CHICAGO POLICE DEPARTMENT

APPLICATION NAME

DATE OF INCIDENT	TIME	REPO	RT NO	EVENT NO.	R	D NO.	BEAT OF OCCUR.
23-FEB-2023	2253	2023-	00536	2305500426	i JO	G163707	0813
ADDRESS OF 5701 S CICE CHICAGO, IL	RO AVE, APT#: 051 CB	NO.				IUCR	
MEMBER RANK	MEMBER LAST NAME	ME	MBER FIRS	ST NAME			
9161	MONROE	S⊦	IAWN				
SUBJECT LAST NAME HERNANDEZ	SUBJECT JAIME	BUBJECT FIRST NAME IAIME					

WITNESS STATEMENT

ONE WITNESS WAS PRESENT BUT REFUSED TO PROVIDE HIS INFORMATION BECAUSE HE DIDN'T WANT TO GET THAT DEEPLY INVOLVED. THE WITNESS STATED THAT HE OBSERVED THE OFFICER KICK THE HOMELESS PERSONS' BAG AND THEN HIT HIM OVER THE HEAD WITH HIS RADIO FOR NO APPARENT REASON.