

TACTICAL RESPONSE REPORT/Chicago Police Department

TRR REPORT NO. 2026-03355

INCIDENT	DATE OF INCIDENT	TIME	ADDRESS OF OCCURRENCE		LOCATION CODE	BEAT/OCCUR.	VIDEO RECORDED INCIDENT ☐ BWC ☐ IN-CAR VIDEO ☐ OTHER VIDEO							
	09-JUN-2026	1730	18924 MARTIN CT COUNTRY CLUB HILLS, IL 60478		304	3100								
	BUSINESS NAME		☐ DNA EXACT AREA WITHIN LOCATION (E.G., BASEMENT, STAIRWAY, BEDROOM)		ASSIGNMENT TYPE ☐ ON-VIEW ☒ OTHER SURVEIL									
			STREET		☐ SUPERVISOR DIRECTED ☐ CALL FOR SERVICE									
INVOLVED MEMBER	EVENT NO.		RD NO.		UCR CODE	IR NO.		CB NO.						
	2616010466		JK288599		5141	2452248								
	LIGHTING ☒ DAYLIGHT ☐ DARKNESS	☐ DUSK ☐ DAWN ☐ ARTIFICIAL	WEATHER ☒ CLEAR ☐ CLOUDY	☐ RAIN ☐ SNOW/ICE ☐ FOG	PATROL TYPE? ☐ POLICE CAR ☐ FOOT	☐ BICYCLE ☐ MOTORCYCLE/ PAPV	☐ SQUADROL ☐ SQUAD/ PLATOON	MEMBER WAS? ☒ ALONE ☐ WITH PARTNER	ASSIST UNITS ON SCENE? ☐ YES ☒ NO	INCIDENT ☐ INDOOR ☒ OUTDOOR				
	RANK 9161	LAST NAME TURNER II		FIRST NAME VINCENT		EMPLOYEE NO.		WATCH 4	SEX ☒ M ☐ F	RACE 1	AGE 48	HT. 180	WT. 509	
SUBJECT INFORMATION	DATE OF APPT.		UNIT & BEAT OF ASSIGN.		DUTY STATUS	IN UNIFORM?	TYPE OF MEMBER INJURY		SUBJECT INJURY BY MEMBER'S USE OF FORCE?					
	29-SEP-2014		193 6571C		☒ ON ☐ OFF	☐ YES ☒ NO	☐ None / None Apparent ☒ Minor Swelling		☐ Laceration Requiring Sutures ☐ Broken/Fractured Bone(s) ☐ Heart Attack/Stroke/Aneurysm		☐ Gun Shot ☐ Fatal ☒ Other (Explain)			
							☒ Minor Contusion/Laceration ☐ Complaint of Substantial Pain ☐ Significant Contusion		☐ None/None Apparent ☐ Subject Alleged Injury		☐ Non-Fatal - Minor Injury ☒ Non-Fatal - Major Injury ☐ Fatal			
SUBJECT'S ACTIONS (Check all that apply)	LAST NAME		FIRST NAME		M.I.	SEX	RACE	D.O.B.		HT.	WT.			
	EDWARDS		DEMOND			☒ M ☐ F	BLACK	-2008		509	160			
	ADDRESS		TELEPHONE NO.		CONDITION ☐ UNK ☐ Injured Not by the Member's Force ☐ Under Influence of Drugs ☐ Disability (Describe) ☐ Apparently Normal ☐ Alleges Injury by Member ☐ Mental Illness / ☐ Other (Specify) ☒ Injured by Member ☐ Under Influence of Alcohol ☐ Emotional Disorder									
MEMBER'S RESPONSE (Check all that apply)	MEDICAL TREATMENT?		☒ Performed by Member ☒ Taken to Hospital (Specify) ☐ OTHER (Specify)		SUBJECT INJURY BY MEMBER'S USE OF FORCE?									
	☐ Refused Medical Aid ☐ Offered/EMS Requested		☒ Performed by CFD EMS		CHRIST MEDICAL CENTER		☐ None/None Apparent ☐ Non-Fatal - Minor Injury ☐ UNK ☐ Subject Alleged Injury ☒ Non-Fatal - Major Injury ☐ Fatal							
WEAPON USE	DID NOT FOLLOW VERBAL DIRECTION		☒ PHYSICAL ATTACK WITHOUT WEAPON (SPECIFY)		THROWN OBJECT (DESCRIBE)		WAS SUBJECT ARMED WITH WEAPON? ☐ NO ☒ YES, DESCRIBE BELOW:							
	☐ UNABLE TO UNDERSTAND VERBAL DIRECTION		☐ HAND/ARM/ELBOW STRIKE		☒ IMMINENT THREAT OF BATTERY WITH WEAPON		☐ BLUNT OBJECT (DESCRIBE) ☐ KNIFE/CUTTING INSTRUMENT ☐ SHOTGUN							
	☒ VERBAL THREATS		☐ KNEE/LEG STRIKE		☐ ATTEMPT TO OBTAIN MEMBER'S WEAPON		☐ CHEMICAL WEAPON ☐ TASER/STUN GUN ☐ REVOLVER ☐ OTHER (DESCRIBE)							
	☒ STIFFENED (DEAD WEIGHT)		☐ MOUTH/TEETH/SPIT		☐ PHYSICAL ATTACK WITH WEAPON		☐ VEHICLE ☐ RIFLE							
WEAPON USE	☒ PULLED AWAY		☒ GRAB/HOLD/RESTRAIN		☐ USED FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM		WEAPON USE:							
	☒ FLED		☒ WRESTLE/GRAPPLE		☐ OTHER (DESCRIBE)		☒ DNA ☐ Used - Attempt to Attack Member ☐ Obtained Member's Weapon							
	☒ IMMINENT THREAT OF BATTERY - NO WEAPON		☐ OTHER (DESCRIBE)		☐ OTHER (DESCRIBE)		☐ Possessed ☐ Used - Attacked Member ☐ Member at Gunpoint							
	☐ PHYSICAL OBSTRUCTION						☐ Displayed, Not Used ☐ Member Shot/Shot At							
MEMBER'S RESPONSE (Check all that apply)	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							
MEMBER'S RESPONSE (Check all that apply)	REASON FOR RESPONSE?		☐ Defense of Member of Public ☐ Fleeing Subject ☐ Other (Describe)		☐ Ordered by Supervisor									
	☒ Defense of Self		☒ Overcome Resistance or Aggression		☒ Subject Armed with Weapon		Name Star No.							
	☐ Defense of Department Member		☐ Stop Self-Inflicted Harm		☐ Unintentional									
MEMBER'S RESPONSE (Check all that apply)	FORCE MITIGATION EFFORTS		CONTROL TACTICS											
	☒ MEMBER PRESENCE ☐ ZONE OF SAFETY ☐ MOVEMENT TO AVOID ATTACK		☐ TACTICAL POSITIONING ☐ NONE		☐ ESCORT HOLDS ☐ CONTROL INSTRUMENT ☐ HANDCUFFS/PHYSICAL RESTRAINTS									
	☒ VERBAL DIRECTION/CONTROL TECHNIQUES ☒ SPECIALIZED UNITS		☐ ADDITIONAL UNIT MEMBERS ☐ OTHER		☐ WRISTLOCK ☐ PRESSURE SENSITIVE AREAS									
					☐ ARMBAR ☒ OTHER ATTEMPTING TO SUBDUE									
MEMBER'S RESPONSE (Check all that apply)	RESPONSE WITHOUT WEAPONS		RESPONSE WITH WEAPON USE											
	☐ OPEN HAND STRIKE ☐ KICKS		☐ OC/CHEMICAL WEAPON ☐ TASER		☐ LESS LETHAL SHOTGUN (DESCRIBE BELOW) ☐ REVOLVER ☒ SEMI-AUTO PISTOL									
	☐ TAKE DOWN ☐ PUSH/PHYSICAL REDIRECTION		☐ OC/CHEMICAL WEAPON W/ AUTHORIZATION*		☐ CANINE ☐ RIFLE ☐ SHOTGUN									
	☐ ELBOW STRIKE ☒ OTHER		☐ LRAD W/ AUTHORIZATION*		☐ BATON/EXPANDABLE BATON ☐ OTHER IMPACT MUNITIONS (DESCRIBE BELOW) ☐ OTHER									
MEMBER'S RESPONSE (Check all that apply)	ATTEMPTED TO HOLD		AUTHORIZED BY (NAME)		RANK		STAR NO.		UNIT NO.					
MEMBER'S RESPONSE (Check all that apply)	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 ☐ YES ☐ FOOT ☐ VEHICLE ☐ OTHER					
MEMBER'S RESPONSE (Check all that apply)	WEAPON TYPE:		☒ SEMI-AUTO PISTOL ☐ SHOTGUN		NO. OF DISCHARGES OF THE WEAPON.		WEAPON SERIAL NO.		WEAPON CERT. NO.					
	☐ CHEMICAL WEAPON ☐ REVOLVER ☐ OTHER		☐ TASER ☐ RIFLE		1									
	DID THIS WEAPON CONTRIBUTE TO A SUBJECT INJURY?		☒ YES ☐ NO ☐ UNK		DID THE DISCHARGE RESULT IN A SELF-INFLICTED INJURY?		☒ NO ☐ YES-SUBJECT ☐ YES-MEMBER		WAS SUBJECT VEHICLE USED AS A WEAPON? ☒ NO ☐ YES - AGAINST MEMBER ☐ YES - AGAINST OTHER PERSON					
MEMBER'S RESPONSE (Check all that apply)	WAS DISCHARGE ONLY TO DESTROY/DETER AN ANIMAL?		☐ YES ☒ NO		WAS THIS AN UNINTENTIONAL DISCHARGE DURING A NON-CRIMINAL INCIDENT?		☐ YES ☒ NO		PERSON/OBJECT(S) STRUCK BY THE DISCHARGE OF MEMBER'S WEAPON (CHECK ALL THAT APPLY):					
									☒ SUBJECT ☐ DEPARTMENT MEMBER ☐ ANIMAL ☐ NONE ☐ OTHER OBJECT					
									☐ VEHICLE ☐ UNKNOWN					
MEMBER'S RESPONSE (Check all that apply)	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		☐ 1 ☐ 2 ☐ DNA ☐ OTHER		☐ 1 ☐ 2 ☐ DNA ☐ OTHER	
MEMBER'S RESPONSE (Check all that apply)	FIREARM DISCHARGE ONLY		WHO FIRED FIRST SHOT? ☒ MEMBER ☐ OTHER (Specify)		TOTAL NO. OF SHOTS FIRED		WAS FIREARM RELOADED DURING INCIDENT?		MAKE/ MANUFACTURER		MODEL		DID MEMBER FIRE AT A VEHICLE?	
					1		☐ YES ☒ NO		GLOCK GMBH		17		☒ NO ☐ YES	

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.)

TURNER II, VINCENT	11	16484	
--------------------	----	-------	--

REVIEWING SUPERVISOR

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

WITNESSES

DATE OF BIRTH

WITNESS INTERVIEW
☐ INTERVIEWED ☐ NOT
☐ REFUSED AVAILABLE

☐ ADDITIONAL WITNESSES

ADDITIONALLY, AND PURSUANT TO 50 ILCS 706/10-20, EFFECTIVE JULY 1, 2021, I HAVE NOT REVIEWED ANY BODY-WORN CAMERA FOOTAGE PRIOR TO THE COMPLETION OF THIS SECTION OF THE TRR.

R/SGT CHECKED FOR ACCURACY AND COMPLETENESS.

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

2026-0002897

REVIEWING SUPERVISOR NAME (Print)	RANK/TITLE CODE	STAR NO.	SIGNATURE	DATE/TIME COMPLETED
RAMAGLIA, FRANK	9	1775		10-JUN-2026 0107

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

TACTICAL RESPONSE REPORT-INVESTIGATION/Chicago Police Department

FRD TRACKING NO. 2026-03355

INCIDENT INFORMATION	DATE OF INCIDENT	TIME	ADDRESS OF OCCURRENCE	EVENT NO.	RD NO.	
	09-JUN-2026	1730	18924 MARTIN CT COUNTRY CLUB HILLS, IL 60478	2616010466	JK288599	
	RANK 9161	MEMBER LAST NAME TURNER II	MEMBER FIRST NAME VINCENT	EMPLOYEE NO. [REDACTED]	CB NO.	CHARGE
	SUBJECT LAST NAME EDWARDS	SUBJECT FIRST NAME DEMOND	M.I.	SEX ☒ M ☐ F	RACE BLK	D.O.B. [REDACTED]-2008

LIEUTENANT OR ABOVE/INCIDENT COMMANDER REVIEW

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

VISUAL INSPECTION CONDUCTED ☐ YES ☒ NO DATE/TIME _____ LOCATION _____ 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.)
Offender transported from scene to Christ Hospital for Treatment

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.)
This is an OIS level 3 use of force incident to be reviewed by Illinois State Police (ISP) because incident occurred in Country Club Hills, Illinois. R/DC responded to the Northwestern Palos Hill's Hospital. After R/DC's arrival at hospital found member being treated by Doctor Nickerson for injuries to knee, back, elbow, neck, head and eye, in good condition for observation. BIA Sgt Breen was on scene and collected urine for urinalysis at 2105hrs. BIA Sgt Breen observed Member in R/DC presence before conducting breathalyzer test for alcohol, BAC of .0000 recorded at 2124hrs. Member was discharged and relocated to Area 2 Detective Division. ET Brown #13372 Beat 5825 responded for photographs of injuries and inventory of evidence 0030hrs.

The offender was transported to Christ hospital from the scene with a GSW to the abdomen.

No BWC to review. No ICC available as Member's vehicle not

COMMENTS CONTINUED ON ATTACHED ADDITIONAL INFORMATION FORM

UNITS ON-SCENE OF THE INCIDENT: ATF, County Club Hills Police Department, FBI, ISP, Cook County State's Attorney's Office, COPA

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: 2025-0002897 ☒ 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) CHUNG, STEPHEN C	RANK/TITLE CODE DEPUTY CT	STAR NO. 96	SIGNATURE [REDACTED]	DATE/TIME COMPLETED 10-Jun-2026 0152
---	------------------------------	----------------	-------------------------	---

TACTICAL RESPONSE REPORT-INVESTIGATION/Chicago Police Department

FRD TRACKING NO. 2026-03355

INCIDENT INFORMATION	DATE OF INCIDENT		TIME	ADDRESS OF OCCURRENCE		EVENT NO.		RD NO.		
	09-JUN-2026		1730	18924 MARTIN CT COUNTRY CLUB HILLS, IL 60478		2616010466		JK288599		
	RANK	MEMBER LAST NAME			MEMBER FIRST NAME		EMPLOYEE NO.	CB NO. CHARGE		
	9161	TURNER II			VINCENT					
SUBJECT LAST NAME				SUBJECT FIRST NAME			M.I.	SEX	RACE	D.O.B.
EDWARDS				DEMOND				☒ M ☐ F	BLK	-2008

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):

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:

REQUIRED NOTIFICATION TO:		NAME:		EMPLOYEE / STAR NO.	DATE/TIME COMPLETED
☒ COPA	☒ CPIC	☐ NONE	CHUNG, STEPHEN C	96	DEPUTY CHIEF
LT OR ABOVE/INCIDENT COMMANDER NAME (Print)			RANK/TITLE CODE	STAR NO.	SIGNATURE
CHUNG, STEPHEN C				96	
					DATE/TIME COMPLETED
					10-Jun-2026 0152

CLEARNET - ADDITIONAL INFORMATION

CHICAGO POLICE DEPARTMENT

APPLICATION NAME

TACTICAL RESPONSE REPORT

DATE OF INCIDENT 09-JUN-2026	TIME 1730	REPORT NO 2026-03355	EVENT NO. 2616010466	RD NO. JK288599	BEAT OF OCCUR. 3100
ADDRESS OF OCCURENCE 18924 MARTIN CT COUNTRY CLUB HILLS, IL 60478	CB NO.			IUCR 5141	
MEMBER RANK 9161	MEMBER LAST NAME TURNER II	MEMBER FIRST NAME VINCENT			
SUBJECT LAST NAME EDWARDS		SUBJECT FIRST NAME DEMOND			

INVESTIGATION COMMENTS

equipped.

ISP will document any witness statements and recovered evidence. A Walk-thru of scene was not conducted by R/DC after member's discharge from hospital because Doctor had provided medication to Member. COPA Clark and Hayes had responded to scene and was met by Commander Kinney at 2000hrs, LOG 2026-0002897 obtained.

Member entered into the Traumatic Incident Stress Management Program by Lt. Hillard #388. Member notified of the 30-day administrative duty requirement. FBI conducted collection of evidence at the original scenes and has custody of Member's Firearm. Member was approved for a duty replacement weapon.