

REPORT : ZDOJRPT

SUPERIOR COURT OF CALIFORNIA
Disposition of Arrest (8715)
25-MAR-2017 THRU 31-MAR-2017

PAGE 330
RUN DATE 15-SEP-2017
RUN TIME 08:03 AM

PERSONAL INFORMATION

Name: REYES, OMAR LORETO
SSN: DL: FBI: DOB: 06-18-1976 Age: 41 CIT: H
Hgt: 5 ' 6 Sex: M Race: H
Wgt: 150 Eye: BRO Hair: BLK

LAW ENFORCEMENT INFORMATION

Arrest: 06-14-2016 Agy: 480600 VACAVILLE POLICE D BK: 480000 Solano Sheriff
Arrest Charges Crime Rpt: 16-04704 BKno: 16-07494
M-PC148 (A) (1) O/C Warrant

CHARGE DISPOSITION INFORMATION

Filed: 06-16-2016 District: 48430 FileNo: FCR322079

Chrg	File Lvl	Final Plea	Dispo Code	Dispo Date	Charge	Degree	Dispo Lvl
1	M		DISM	08-15-2016	PC 148(A) (1)	0	M
2	I	N	CONV	08-15-2016	PC 415(3)	0	I

SENTENCE INFORMATION

Chrg Sentence Date SENTENCES:
2 08-15-2016 Search & Seizure = NO
Jail = 125 Days

CertDdt: 03-28-2017 CertDist: 48430 Fairfield Court

CLKNm: C ADAMS

CLKTL1: LEGAL CLERK

**CONTROLLED DOCUMENT
NO THIRD PARTY RELEASE
VACAVILLE POLICE DEPT
RSL TO: _____
BY: _____ DATE: _____**

COPIES TO:		SOLANO COUNTY SHERIFF'S OFFICE 530 UNION AVENUE, SUITE 100 FAIRFIELD, CA 94533 ARREST REPORT <input type="checkbox"/> JUVENILE <input checked="" type="checkbox"/> ADULT AGENCY NO. <u>4806</u>				CASE NO. <u>16-01704</u>		PAGE <u>1</u>	
<input type="checkbox"/> DA	<input type="checkbox"/> PROB					REP DEV CODE	DDD	BEAT <u>6</u>	
<input type="checkbox"/> DOJ	<input type="checkbox"/> INV	PROP 115 QUALIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEAPON USED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
<input type="checkbox"/> PAT	<input type="checkbox"/> RISK MANAGEMENT	DOMESTIC VIOLENCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		BILLABLE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
<input type="checkbox"/> COUNTY COUNSEL	<input type="checkbox"/> OTHER	DATE/TIME OF ARREST <u>6/14/16 1259</u>		48 HOUR EXPIRATION <u>488</u>					
LOCATION OF ARREST <u>BROOKDALE CT.</u>		ARRESTING AGENCY <u>VACAVILLE</u>		ARRESTING OFFICER ID # <u>BRENNAN</u>					
TYPE OF ARREST <input checked="" type="checkbox"/> PC <input type="checkbox"/> WARRANT <input type="checkbox"/> CITIZEN <input type="checkbox"/> OTHER		LOCATION OF OFFENSE <u>()</u>							
NAME (Last, First Middle) <u>REYES OMAR LORETO</u>		SEX <u>M</u>	RACE <u>H</u>	DOB / AGE <u>6/18/76</u>	HGT <u>507</u>				
RESIDENTIAL ADDRESS		WGT <u>165</u>	HAIR <u>BRO</u>	EYES <u>BRO</u>	POE				
CITY <u>VACAVILLE</u>		STATE <u>CA</u>	YRS	RES. PHONE <u>(NONE)</u>					
BUSINESS NAME AND ADDRESS		CITY	BUS. PHONE <u>()</u>	BUILD <input type="checkbox"/> 0 UNK <input checked="" type="checkbox"/> 2 MED <input type="checkbox"/> 4 MUSCULAR					
AKA		BUILD <input type="checkbox"/> 0 UNK <input type="checkbox"/> 2 MED	OCCUPATION						
AFFILIATION									
LICENSE #	STATE	YEAR	MAKE	MODEL	DISPOSITION OF VEHICLE				
CODE SECTION / DESCRIPTION <u>PC 647(CF)</u>		MISD <input checked="" type="checkbox"/>	FELONY	WARRANT NO.	ISSUING AGENCY				
<u>PC 148(C)(1)</u>		<input checked="" type="checkbox"/>							
<u>PC 1203.2</u>			<input checked="" type="checkbox"/>						
FACTS ESTABLISHING ELEMENTS AND IDENTIFICATION OF DEFENDANT 5 SEE ATTACHED REPORTS, INCORPORATED HEREIN BY THIS REFERENCE									
<u>SEE ARTS</u>									
VICTIM'S AGE		VICTIM'S INJURIES		WEAPON DESCRIPTION					
VALUE OF PROP. LOSS		TYPE OF PROPERTY	TYPE OF NARCOTICS	QUANTITY	STREET VALUE WHOLESALE VALUE				
<input type="checkbox"/> BAIL PER SCHEDULE		BAIL SET AT \$		RELEASED FROM CUSTODY <input type="checkbox"/> BAIL <input type="checkbox"/> PTA <input type="checkbox"/> PC 625 <input type="checkbox"/> OTHER					
I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT TO THE BEST OF MY INFORMATION AND BELIEF.									
EXECUTED ON (DATE): <u>6/14/16</u>		AT SOLANO COUNTY, CALIFORNIA BY (ARRESTING OFFICER SIGNATURE): <u>M. BRENNAN</u>							
ON THE BASIS OF <input type="checkbox"/> THE OFFICER'S DECLARATION <input type="checkbox"/> REPORTS REVIEWED, I HEREBY DETERMINE THAT THERE <input type="checkbox"/> IS <input type="checkbox"/> IS NOT PROBABLE CAUSE TO BELIEVE THIS ARRESTEE HAS COMMITTED A CRIME ((DATE): _____ (TIME): _____ (JUDICIAL SIGNATURE): _____)									
COMPLAINTS OF ILLNESS OR INJURY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		EVIDENCE OF ILLNESS OR INJURY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> COURT <input type="checkbox"/> OTHER (EXPLAIN)					
EXPLAIN: <u>CUT TO HEAD</u>		OR: <u>AMY THOMPSON</u>							
EMERGENCY NOTIFICATION NAME (LAST, FIRST, MI) <u>REYES,</u>		ADDRESS		CITY <u>VACAVILLE</u>	RES. PHONE <u>UNKNOWN</u>				
CASH	COIN	TOTAL	WITNESS	DATE	TIME				
HOLDS	TRANSPORTING OFFICER <u>BRENNAN</u>	ID # <u>672</u>	AGENCY <u>WPD</u>	REVIEWED BY <u>[Signature]</u>	ENTERED RMS BY:				
OTHER AGENCY NO.	TIME REC. <u>1517</u>	RECEIVING OFFICERS <u>ANNA</u>	BI NUMBER <u>135646</u>	BOOKING NUMBER					

(REV 113000)

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BY: _____ DATE: _____

SOLANO COUNTY
SHERIFF'S OFFICE

ARREST REPORT

AGENCY NO. _____

CASE NO.

16-04704

PAGE

2

AMT OF HAIR 7 Q21 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 1 Thick <input type="checkbox"/> 2 Thin <input type="checkbox"/> 3 Receding <input type="checkbox"/> 4 Bald <input type="checkbox"/> 5 Other		HAIR STYLE 11 Q25 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 1 Long <input type="checkbox"/> 2 Short <input type="checkbox"/> 3 Collar <input type="checkbox"/> 4 Military <input type="checkbox"/> 5 Crew-Cut <input type="checkbox"/> 6 Right Part <input type="checkbox"/> 7 Left Part <input type="checkbox"/> 8 Center Part <input type="checkbox"/> 9 Straight Back <input type="checkbox"/> 10 Pony Tail <input type="checkbox"/> 11 Afro Natural <input type="checkbox"/> 12 Processed <input type="checkbox"/> 13 Teased <input type="checkbox"/> 14 Other		COMPLEXION 13 Q27 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 1 Clear <input type="checkbox"/> 2 Acne <input type="checkbox"/> 3 Pockmarked <input type="checkbox"/> 4 Freckled <input type="checkbox"/> 5 Albino <input type="checkbox"/> 6 Other		TATTOOS/SCARS 14 Q28 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 0 None <input type="checkbox"/> 1 Yes (no description) <input type="checkbox"/> 2 Regular Glasses <input type="checkbox"/> 3 Sun Glasses <input type="checkbox"/> 4 Wire Frame <input type="checkbox"/> 5 Plastic Frame <input type="checkbox"/> 6 Other		DISTINGUISHING MARKS 15 Q30 <input type="checkbox"/> 1 Face <input type="checkbox"/> 2 Teeth <input type="checkbox"/> 3 Neck <input type="checkbox"/> 4 R/Arm <input type="checkbox"/> 5 L/Arm <input type="checkbox"/> 6 R/Hand <input type="checkbox"/> 7 L/Hand <input type="checkbox"/> 8 R/Leg <input type="checkbox"/> 9 L/Leg <input type="checkbox"/> 10 R/Shoulder <input type="checkbox"/> 11 L/Shoulder <input type="checkbox"/> 12 Front Torso <input type="checkbox"/> 13 Back Torso <input type="checkbox"/> 14 Other		WEAPONS 21 Q33 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 0 None <input type="checkbox"/> 1 Club <input type="checkbox"/> 2 Hand Gun <input type="checkbox"/> 3 Other Unknown Gun <input type="checkbox"/> 4 Rifle <input type="checkbox"/> 5 Shot Gun <input type="checkbox"/> 6 Toy Gun <input type="checkbox"/> 7 Simulated <input type="checkbox"/> 8 Pocket Knife <input type="checkbox"/> 9 Fixed Blade Knife <input type="checkbox"/> 10 Other Cut/Stab Instrument <input type="checkbox"/> 11 Hands/Feet <input type="checkbox"/> 12 Bodily Force <input type="checkbox"/> 13 Strangulation <input type="checkbox"/> 14 Tire Iron <input type="checkbox"/> Other	
TYPE OF HAIR 8 Q22 <input type="checkbox"/> 1 Unknown <input type="checkbox"/> 2 Straight <input type="checkbox"/> 3 Wavy <input type="checkbox"/> 4 Fine <input type="checkbox"/> 5 Coarse <input type="checkbox"/> 6 Wiry <input type="checkbox"/> 7 Wig <input type="checkbox"/> 8 Other		FACIAL HAIR 12 Q26 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 0 N/A <input type="checkbox"/> 1 Clean Shaven <input type="checkbox"/> 2 Mustache <input type="checkbox"/> 3 Full Beard <input type="checkbox"/> 4 Goatee <input type="checkbox"/> 5 Fumanchu <input type="checkbox"/> 6 Lower Lip <input type="checkbox"/> 7 Side Burns <input type="checkbox"/> 8 Fuzz <input type="checkbox"/> 9 Unshaven <input type="checkbox"/> 10 Other		GLASSES 14 Q28 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 0 None <input type="checkbox"/> 1 Yes (no description) <input type="checkbox"/> 2 Regular Glasses <input type="checkbox"/> 3 Sun Glasses <input type="checkbox"/> 4 Wire Frame <input type="checkbox"/> 5 Plastic Frame <input type="checkbox"/> 6 Other		UNIQUE CLOTHING 17 Q31 <input type="checkbox"/> 1 Hat <input type="checkbox"/> 2 Gloves <input type="checkbox"/> 3 Ski Mask <input type="checkbox"/> 4 Stocking Mask <input type="checkbox"/> 5 Baseball Cap <input type="checkbox"/> 6 Other		WEAPON IN 19 Q32 <input type="checkbox"/> 0 N/A <input type="checkbox"/> 1 Bag/Brief Case <input type="checkbox"/> 2 Newspaper <input type="checkbox"/> 3 Pocket <input type="checkbox"/> 4 Shoulder Holster <input type="checkbox"/> 5 Waist Band <input type="checkbox"/> 6 Other		WEAPON FEATURE 22 Q34 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 0 None <input type="checkbox"/> 1 Altered Stock <input type="checkbox"/> 2 Sawed Off <input type="checkbox"/> 3 Automatic <input type="checkbox"/> 4 Bolt Action <input type="checkbox"/> 5 Pump <input type="checkbox"/> 6 Revolver <input type="checkbox"/> 7 Blue Steel <input type="checkbox"/> 8 Chrome/Nickel <input type="checkbox"/> 9 Double Barrel <input type="checkbox"/> 10 Single Barrel <input type="checkbox"/> 11 Other	
HAIR CONDITION 9 Q23 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 1 Clean <input type="checkbox"/> 2 Dirty <input type="checkbox"/> 3 Greasy <input type="checkbox"/> 4 Matted <input type="checkbox"/> 5 Odor <input type="checkbox"/> 6 Other		VOICE 15 Q29 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 0 N/A <input type="checkbox"/> 1 Lisp <input type="checkbox"/> 2 Sturred <input type="checkbox"/> 3 Stutter <input type="checkbox"/> 4 Accent <input type="checkbox"/> 5 Other		TEETH 18 Q36 <input type="checkbox"/> 1 Broken <input type="checkbox"/> 2 Chipped <input type="checkbox"/> 3 Crooked <input type="checkbox"/> 4 Protruding <input type="checkbox"/> 5 Missing <input type="checkbox"/> 6 None <input type="checkbox"/> 7 Gold <input type="checkbox"/> 8 Silver <input type="checkbox"/> 9 Stained/Decayed		FACE 20 Q37 <input type="checkbox"/> 1 Broad <input type="checkbox"/> 2 High Cheek <input type="checkbox"/> 3 Long <input type="checkbox"/> 4 Oval <input type="checkbox"/> 5 Round <input type="checkbox"/> 6 Square <input type="checkbox"/> 7 Thin					
R/L HANDED 10 Q24 <input type="checkbox"/> 0 Unknown <input type="checkbox"/> 1 Right <input type="checkbox"/> 2 Left											

JUVENILE ARREST INFORMATION 23	SCHOOL LAST ATTENDED		LOCATION		GRADE	
	NAME OF FATHER-GUARDIAN	ADDRESS	CITY	RES. PHONE	BUS. PHONE	
	NAME OF MOTHER-GUARDIAN	ADDRESS	CITY	RES. PHONE	BUS. PHONE	
	NAME OF PARENT-GUARDIAN	ADDRESS	CITY	RES. PHONE	BUS. PHONE	
PERSON NOTIFIED	NOTIFIED BY	METHOD OF NOTIFICATION	DATE	TIME		

CITIZEN ARREST 24	CITIZEN ARREST STATEMENT: I HEREBY ARREST THE ABOVE PERSON ON THE CHARGE INDICATED HEREIN AND REQUEST A PEACE OFFICER TO TAKE HIM/HER INTO CUSTODY. I WILL APPEAR TO SIGN A COMPLAINT AGAINST THE PERSON THAT I HAVE ARRESTED. (SIGNATURE)					
	CITIZEN'S NAME	ADDRESS	CITY	RES. PHONE	BUS. PHONE	

IN VIEW OF THE INFORMATION HEREIN STATED, THE ABOVE ARRESTEE WAS NOT RELEASED PURSUANT TO PC 853.6 SPECIFICALLY BECAUSE:

<input checked="" type="checkbox"/> INTOXICATED STATE MAY RESULT IN DANGER TO SELF OR OTHERS.	<input type="checkbox"/> ARRESTED FOR 23152(a) & (b) CVC.
<input type="checkbox"/> ARRESTEE REQUIRED MEDICAL EXAMINATION OR CARE OR COULD NOT CARE FOR OWN SAFETY.	<input type="checkbox"/> THERE ARE ADDITIONAL OUTSTANDING WARRANTS.
<input type="checkbox"/> THE IMMEDIATE RELEASE WOULD JEOPARDIZE PROSECUTION.	<input type="checkbox"/> ARRESTEE HAD NO PERSONAL IDENTIFICATION.
<input type="checkbox"/> ARRESTED FOR ONE OR MORE OFFENSES LISTED UNDER SECTION 49302 CVC.	<input type="checkbox"/> RELEASE WOULD INCREASE LIKELIHOOD OF OFFENSE CONTINUING.
<input type="checkbox"/> DEMANDED IMMEDIATE APPEARANCE.	<input type="checkbox"/> REFUSED TO SIGN WRITTEN PROMISE TO APPEAR.

REPORTING OFFICER M. BRENNAN	ID # 672	DATE 5/14/16	REVIEWED BY / ID #	DATE
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CONTROLLED DOCUMENT
NO THIRD PARTY RELEASE
VACAVILLE POLICE DEPT
RSL TO: _____
BY: _____ DATE: _____

Solano County Detention Facilities
ON-VIEW & PROBABLE CAUSE DECLARATION INFORMATION

Control No. 190237

Case No. 2016-04704

The undersigned declares, upon information and belief: that he/she is an officer with the **Vacaville Police**

That the detainee/arrestee **Reyes, Omar Loreto**, DOB: **6/18/1976**, Current Age: **39**, Sex: **male**
Address

Home Phone: **None** Work Phone: --- Cell Phone: ---

was arrested **6/14/2016 10:59** for the crime(s) of:

<u>OFFENSE</u>	<u>SEVERITY</u>	<u>COUNT</u>
1203.2 PC PROBATION VIOLATION, PROBABLE CAUSE ARREST	F	1
148(A) PC OBSTRUCT PUBLIC OFFICER	M	1
647(F) PC DISORD CONDUCT UI/ALCOHOL AND/ORDRUGS	M	1

That the detainee committed said offense(s) in the manner and by the means as set forth and described as follows:

On Tuesday, 6/14/2014, at approximately 1051 hours, I was wearing a full Vacaville Police uniform and driving a fully marked patrol vehicle. I observed a Hispanic male, later identified as Suspect - Omar Reyes, riding a bicycle the wrong direction in traffic. I attempted to stop the subject in the area of Peabody Rd. and Beelard Dr., but he refused to stop and continued riding eastbound on the bicycle trail.

I later located the suspect near some bushes at 408 Brookdale Ct. The suspect led me on a short foot pursuit into a neighboring yard, and was forcibly taken to the ground. The suspect displayed objective signs on intoxication and was determined to be unable to safely care for himself. The suspect was also found to be on active felony probation out of Solano County for PC 245(a)(4) (Docket # FCR316752).

Omar was placed under arrest for PC 148(a)(1), PC 1203.2, and PC 647(f). Omar was treated by Dr. Thomsen for a head laceration at Vaca Valley Hospital and medically cleared.

ADDITIONAL INFORMATION:

Case Number: **2016-04704**

Victim's Age: --- Victim's Sex: --- Victim's Injuries: ---

Description Of Weapon: --- Value Of Property Loss: ---

Type Of Narcotics: --- Presumptive Test Performed:

PAS/Intoxilator/BA: **No** BAC: ---

Offense Location: **City**

Arrest Address: **408 Brookdale Ct., Vacaville, CA 95687**

There are the following additional authorities for holding the detainee/arrestee:

Probation Hold

Reason citation release was denied (Misdemeanors only, 853.6(i)PC):

Arrestee is so intoxicated, he/she is a danger to him/herself or others.

OFFICER SIGNATURE

On **6/14/2016** at **13:19**, in Solano County, CA

I declare under penalty of perjury that the foregoing is true and correct:

Officer: **Michael Brennan**, Employee/Badge Number: **1873**, Agency: **Vacaville Police**

CERTIFICATE OF PROBABLE CAUSE

CONTROLLED DOCUMENT
NO THIRD PARTY RELEASE
VACAVILLE POLICE DEPT

RSL TO: _____

BY: _____ DATE: _____

16-4704

[not reviewed by judge]

CONTROLLED DOCUMENT
NO THIRD PARTY RELEASE
VACAVILLE POLICE DEPT
RSL TO: _____
BY: _____ DATE: _____
6/14/2016

CRIME	INCIDENT NUMBER	RELATED REPORTS N	ADDN'L PROPERTY N	ADDN'L OFFENSES Y	VACAVILLE POLICE DEPARTMENT CRIME / INCIDENT REPORT			PAGE 1 OF 6	CASE NUMBER 2016-04704	
	BEAT	DISTRICT		DATE 6/14/2016	DAY OF WEEK Tue		TIME 10:51			
	CODE SECTION AND DESCRIPTION (ONE INCIDENT ONLY) PC 148(A)(1) - RESIST/DELAY/OBSTRUCT POLICE/P									
LOCATION OF INCIDENT, CITY STATE ZIP 408 Brookdale, Vacaville, CA 95687										
VICTIM / WITNESS	W-TYPE	VICTIM'S NAME (LAST, FIRST MIDDLE / OR ORGANIZATION)							PHONE	
	RESIDENCE ADDRESS, CITY STATE ZIP							PHONE		
	RACE	SEX	DATE OF BIRTH	ID TYPE	ID NUMBER	ID TYPE	ID NUMBER	INTERPRETER?/LANGUAGE	RELATION TO: VICTIM SUSPECT	
	STATUS	EMPLOYER / SCHOOL			OCCUPATION / RANK / GRADE			DAYS OFF	WORK HOURS	
	BUSINESS ADDRESS, CITY STATE ZIP							PHONE	V/W ASSIST	
	ADDITIONAL INFORMATION (VICTIM VEHICLE INFO. IF APPLICABLE)									
VICTIM / WITNESS	W-TYPE	VICTIM'S NAME (LAST, FIRST MIDDLE / OR ORGANIZATION)							PHONE	
	RESIDENCE ADDRESS, CITY STATE ZIP							PHONE		
	RACE	SEX	DATE OF BIRTH	ID TYPE	ID NUMBER	ID TYPE	ID NUMBER	INTERPRETER?/LANGUAGE	RELATION TO: VICTIM SUSPECT	
	STATUS	EMPLOYER / SCHOOL			OCCUPATION / RANK / GRADE			DAYS OFF	WORK HOURS	
	BUSINESS ADDRESS, CITY STATE ZIP							PHONE	V/W ASSIST	
	ADDITIONAL INFORMATION (VICTIM VEHICLE INFO. IF APPLICABLE)									
M.O. INFORMATION	TOTAL # OF WITNESSES AT CRIME:	0	PLACE OF ATTACK 3. Street			DESCRIPTION OF SURROUNDING AREA 1. Residential				
	FORCE/TOOL/WEAPON	SPECIFY			HOW USED					
	FORCE/TOOL/WEAPON	SPECIFY			HOW USED					
	TYPE OF STRUCTURE N/A	POINT OF ENTRY 0. N/A		SECURITY USED 0. N/A		SUSPECT ACTIONS				
	TARGET(S)	TYPE OF LOCK ATTACKED 0. N/A								
PROPERTY	ITEM NO.	ARTICLE NAME	STOLEN RECV'D	IDENTIFICATION NUMBERS	BRAND, MAKE OR MANUFACTURER	MODEL NAME AND MODEL NUMBER	MISCELLANEOUS DESCRIPTION		VALUE	
	1									
	2									
	3									
	4									
ADMIN	VICTIM INJURED			EXTENT OF TREATMENT		SUSPECT IN CUSTODY Adult				
	REPORTING OFFICER Brennan			ID# 672	DIVISION		APPROVED BY Senf	ID# 480	DATE AND TIME OF FILING 06/14/2016 11:16	
	DETECTIVE(S) ASSIGNED			ID#	DIVISION		CASE STATUS Priority Dacus	AGENCY VV	CRIME TYPE PC 148(A)(1)	

SUSPECT	ARRESTED Y	SUSPECT'S NAME (LAST, FIRST MIDDLE) Reyes, Omar Loreto											
	NICKNAME / AKA						ID TYPE DL	ID NUMBER			ID TYPE	ID NUMBER	
	ADDRESS, CITY STATE ZIP (Home)										PHONE (Call Back)		
	RACE H	SEX M	AGE 39	DATE OF BIRTH 6/18/1976	HEIGHT 5' 06"	WEIGHT 175	BUILD MED		HAIR BLK	EYE BRO			
	ADDITIONAL INFORMATION / FURTHER SUSPECT DESCRIPTION (I.E. GLASSES, TATTOOS, TEETH, BIRTHMARKS, JEWELRY, SCARS, ETC.)												
	SUSPECT CLOTHING												
	HAIR LGTH/TYPE 5. Short		HAIR STYLE 8. Straight		FACIAL HAIR 4. Goatee		COMPLEXION	GEN APPEARANCE	DEMEANOR	SPEECH		VOICE	
	SUSPECT VEHICLE	YEAR	MAKE		MODEL		COLOR / COLOR		BODY TYPE		LICENSE NO.	LIC STATE	
	ADDITIONAL VEHICLE IDENTIFIERS (DAMAGE, CHROME WHEELS, ETC.)						VIN			IMPOUND? / TOWING COMPANY			

SUSPECT	ARRESTED	SUSPECT'S NAME (LAST, FIRST MIDDLE)											
	NICKNAME / AKA						ID TYPE	ID NUMBER			ID TYPE	ID NUMBER	
	ADDRESS, CITY STATE ZIP										PHONE		
	RACE	SEX	AGE	DATE OF BIRTH	HEIGHT	WEIGHT	BUILD		HAIR	EYE			
	ADDITIONAL INFORMATION / FURTHER SUSPECT DESCRIPTION (I.E. GLASSES, TATTOOS, TEETH, BIRTHMARKS, JEWELRY, SCARS, ETC.)												
	SUSPECT CLOTHING												
	HAIR LGTH/TYPE		HAIR STYLE		FACIAL HAIR		COMPLEXION	GEN APPEARANCE	DEMEANOR	SPEECH		VOICE	
	SUSPECT VEHICLE	YEAR	MAKE		MODEL		COLOR / COLOR		BODY TYPE		LICENSE NO.	LIC STATE	
	ADDITIONAL VEHICLE IDENTIFIERS (DAMAGE, CHROME WHEELS, ETC.)						VIN			IMPOUND? / TOWING COMPANY			

EVID/NARR	SEE ATTACHED FORMS FOR EVIDENCE, NARRATIVE, AND OTHER SUPPLEMENTAL INFORMATION.										
	ADDITIONAL VIOLATIONS PC 1203.2 - VIOLATION PROBATION; PC 647(F)DK - DISORDERLY CONDUCT: ALCOHOL										WITNESS CHECK N
											ADDITIONAL PERSONS LISTED N

OAK	OFFICER ASSAULT	OAK ZZ	OFFICERS WITH PERSONAL INJURY	OFFICERS WITHOUT PERSONAL INJURY	ACTIVITY WHEN ASSAULT OCCURRED
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ARSON	ARSON TYPE	CONTENT LOSS	STRUCTURE LOSS	ABANDONED
	DESCRIPTION			

REPORTING OFFICER Brennan	ID# 672	DIVISION	APPROVED BY Senf	ID# 480	DATE AND TIME OF REPORT 06/14/2016 11:46
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**CONTROLLED DOCUMENT
NO THIRD PARTY RELEASE
YACAVILLE POLICE DEPT
RSL TO: _____
BY: _____ DATE: _____**

INCIDENT NUMBER		VACAVILLE POLICE DEPARTMENT OFFICER'S REPORT NARRATIVE		PAGE 3 OF 6	CASE NUMBER 2016-04704
CONTINUED FROM CRIME	BEAT	DISTRICT	DATE 06/14/2016	DAY OF WEEK Tue	TIME 10: 51
PRIMARY CODE SECTION PC 148(A)(1) - RESIST/DELAY/OBSTRUCT POLICE/P					
ADDITIONAL CODE SECTION(S) PC 1203.2 - VIOLATION PROBATION; PC 647(F)DK - DISORDERLY CONDUCT; ALCOHOL					
LOCATION OF INCIDENT, CITY STATE ZIP 408 Brookdale, Vacaville, CA 95687					

SYNOPSIS:

The suspect fled during an attempted bicycle stop following observed Ca. Vehicle Code violations. Officers began to search the area. The suspect was located hiding in a bush and led officers on a short foot pursuit. The suspect was detained and found to be intoxicated to the point he was unable to safely care for himself. The suspect was also on felony probation out of Solano County for PC 245(a)(4). The suspect was arrested on several different charges and transported to Solano County Jail following medical clearance.

SOURCE OF ACTIVITY:

On Tuesday, 6/14/2016, at approximately 1051hours, I was wearing a full Vacaville Police uniform and driving fully marked patrol vehicle #1131. I was driving northbound on Peabody Rd. approaching Beelard Dr. in the number two lane when I observed a Hispanic male with short dark hair, a mustache and goatee, and wearing a blue windbreaker-style jacket riding a bicycle southbound in the northbound bicycle lane (CVC 21201(a)). I observed the subject had a dark, plastic bag containing what looked like a bottle of alcohol or beer.

INVESTIGATION:

I passed the subject and made a U-turn with my vehicle. I activated my emergency lights, including one steady, forward-facing red light, and made a second U-turn, contacting the subject as he approached my vehicle southbound near the entrance to the bicycle trail. As I parked my vehicle, the subject came to within 20ft. of my location. The subject then began to ride eastbound on the bicycle trail.

I exited my vehicle and yelled at the subject, "Hey! Stop!" The subject did not turn around and continued riding eastbound, rounding a curve of the path out of view.

It should be noted a white female was walking the same direction as the subject on the bicycle trail. The female heard my yell, stopped and turned around as the subject rode past her. That female subject clearly heard my yell and saw my patrol vehicle stopped with the emergency lights activated.

I broadcast a description of the male suspect to other officers via radio. I began to search the area by driving east to the bicycle trail entrance at Tulare Dr. Officer Eisert advised via radio the subject was seen by citizens in the area doubling back (i.e. west) on the bicycle trail toward Peabody Rd. I began to drive in that direction, and Officer Eisert further advised the subject was not on Peabody Rd., and was possibly still in the area of Brookdale Ct.

I drove north on Gregory Dr. and then turned west onto Brookdale Ct. As I drove west on Brookdale Ct., I saw what looked like a Hispanic male running toward the bushes in the front of 408 Brookdale Ct. I briefly saw the male had the same face, goatee and mustache as my suspect.

CONTROLLED DOCUMENT
NO THIRD PARTY RELEASE
VACAVILLE POLICE DEPT
 RSL TO: _____
 BY: _____ DATE: _____

REPORTING OFFICER Brennan	ID# 672	DIVISION	APPROVED BY Senf	ID# 480	DATE AND TIME OF REPORT 06/14/2016
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COPY - 06/14/2016

INCIDENT NUMBER		VACAVILLE POLICE DEPARTMENT OFFICER'S REPORT NARRATIVE			PAGE 4 OF 6	CASE NUMBER 2016-04704
CONTINUED FROM CRIME	BEAT	DISTRICT	DATE 06/14/2016	DAY OF WEEK Tue	TIME 10:51	
PRIMARY CODE SECTION PC 148(A)(1) - RESIST/DELAY/OBSTRUCT POLICE/P						
ADDITIONAL CODE SECTION(S) PC 1203.2 - VIOLATION PROBATION; PC 647(F)DK - DISORDERLY CONDUCT; ALCOHOL						
LOCATION OF INCIDENT, CITY STATE ZIP 408 Brookdale, Vacaville, CA 95687						

I immediately stopped and exited my vehicle. I saw the suspect, later identified by Ca. Driver's License as Suspect – Omar Reyes, exit the bushes in the front of that residence. The suspect began to run eastbound on Brookdale Ct. in a sprint. I yelled, "Stop!" The male turned his head, looked directly at me, and continued running.

I advised dispatch I was in a foot pursuit and began to chase the suspect on foot. The suspect mounted the sidewalk and entered the side yard of 579 Gregory Dr.

It should be noted this side yard is landscaped with thick, green grass. The fence-line perimeter of the yard was lined with rocks.

Omar turned to face me a second time as he entered the lawn. I then wrapped my arms around his upper torso and forcibly brought him to the ground on his back in the grass.

As Omar fell backwards to the ground, I saw his head rock backwards and strike a rock along the perimeter of the grass. Omar never lost consciousness and verbally communicated with me as I took him into custody.

I pulled Omar over onto his stomach and detained him in handcuffs without further incident. I advised via radio the suspect was detained, and had incoming units reduce their response. Omar told me his bicycle was under the bridge nearby.

It should be noted I never physically struck Omar or used any force other than taking him to the ground. Omar received an laceration to the back of his head as a result of this incident. As I helped Omar to his feet, I saw blood from his head on the grass and rocks.

Omar was transported by medic to Vaca Valley Hospital, where he was treated by Dr. Amy Thomsen. Omar had an approximately 2.5cm. laceration to the rear of his head. Omar received (6) staples and was medically cleared for jail.

REPORTING OFFICER Brennan	ID# 672	DIVISION	APPROVED BY Senf	ID# 480	DATE AND TIME OF REPORT 06/14/2016
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COPY - 06/14/2016

CONTROLLED DOCUMENT
NO THIRD PARTY RELEASE
VACAVILLE POLICE DEPT
RSL TO: _____
BY: _____ DATE: _____

INCIDENT NUMBER		VACAVILLE POLICE DEPARTMENT OFFICER'S REPORT NARRATIVE			PAGE 5 of 6	CASE NUMBER 2016-04704
CONTINUED FROM CRIME	BEAT	DISTRICT	DATE 06/14/2016	DAY OF WEEK Tue	TIME 10:51	
PRIMARY CODE SECTION PC 148(A)(1) - RESIST/DELAY/OBSTRUCT POLICE/P						
ADDITIONAL CODE SECTION(S) PC 1203.2 - VIOLATION PROBATION; PC 647(F)DK - DISORDERLY CONDUCT: ALCOHOL						
LOCATION OF INCIDENT, CITY STATE ZIP 408 Brookdale, Vacaville, CA 95687						

It should be noted as I detained and spoke with Omar, I could smell the odor of an alcoholic beverage emanating from his breath and person. Omar's eyes were red and watery, and his speech was slurred. Omar had poor balance when standing up and walking to my patrol vehicle.

Omar was placed under arrest for PC 647(f) – Public Intoxication, PC 148(a)(1) – Resisting and Obstructing a Peace Officer, and PC 1203.2 – Probation Violation. Omar was transported to Solano County Jail without further incident.

It should be noted Omar's bicycle was located near the bridge at Peabody Rd. and Beelard Dr. Officers were unable to locate Omar's blue windbreaker jacket.

My body worn camera was activated during part of this incident (I was unable to activate it immediately due to the immediate foot pursuit). This footage was subsequently uploaded to Vacaville Police digital evidence.

Officer Jimenez assisted me by reading Omar his rights per Miranda in Spanish. Omar invoked his rights and chose not to make a statement.

I took digital photos of Omar's injuries. These photos were also logged into Vacaville Police digital evidence.

FOLLOW-UP:

- Video Uploaded to iLems
- Photos Uploaded to iLems
- Audio Uploaded to iLems

DISPOSITION BY OFFICER:

Closed by arrest.

ROUTE REPORT TO:

Solano County District Attorney's Office

**Suspect: Reyes, Omar Loreto DOB: 6/18/1976 Charges: PC 148(a)(1)
PC 647(f)
PC 1203.2**

CONTROLLED DOCUMENT
NO THIRD PARTY RELEASE
VACAVILLE POLICE DEPT
RSL TO: _____
BY: _____ DATE: _____

REPORTING OFFICER Brennan	ID# 672	DIVISION	APPROVED BY Senf	ID# 480	DATE AND TIME OF REPORT 06/14/2016
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COPY - 06/14/2016

**VACAVILLE POLICE DEPARTMENT
OFFICER'S REPORT NARRATIVE**

INCIDENT NUMBER		PAGE 6 of 6		CASE NUMBER 2016-04704	
CONTINUED FROM CRIME	BEAT	DISTRICT	DATE 06/14/2016	DAY OF WEEK Tue	TIME 10:51
PRIMARY CODE SECTION PC 148(A)(1) - RESIST/DELAY/OBSTRUCT POLICE/P					
ADDITIONAL CODE SECTION(S) PC 1203.2 - VIOLATION PROBATION; PC 647(F)DK - DISORDERLY CONDUCT: ALCOHOL					
LOCATION OF INCIDENT, CITY STATE ZIP 408 Brookdale, Vacaville, CA 95687					

REPORTING OFFICER Brennan	ID# 672	DIVISION	APPROVED BY Senf	ID# 480	DATE AND TIME OF REPORT 06/14/2016
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COPY - 06/14/2016

**CONTROLLED DOCUMENT
NO THIRD PARTY RELEASE
VACAVILLE POLICE DEPT
RSL TO: _____
BY: _____ DATE: _____**

REPORT		VACAVILLE POLICE DEPARTMENT ARREST/JUVENILE CONTACT REPORT					PAGE 1 OF 2	CASE NUMBER 2016-04704			
		REPORT TYPE Adult Felony		WARRANT	AGENCY VACAVILLE PD			IN CUSTODY Y		BOOKING NUMBER	
		ARREST DATE / TIME 06/14/2016 10:59		BEAT	DISTRICT	RELATED REPORTS (TYPE/NUMBER)			CITATION NUMBER		
ARRESTEE - CRIME		PRIMARY CHARGE PC 148(A)(1) - RESIST/DELAY/OBSTRUCT POLICE/P - Misdemeanor							DISPOSITION Adult: Booked -		
		ADDITIONAL CHARGE(S) PC 647(F)DK - DISORDERLY CONDUCT: ALCOHOL - Misdemeanor; PC 1203.2 - VIOLATION PROBATION - Felony							DOMESTIC VIOLENCE N		
		PERSON ARRESTED NAME (LAST, FIRST MIDDLE) Reyes, Omar Loreto									
		OTHER NAMES (LAST, FIRST MIDDLE / TYPE)									
		ADDRESS, CITY STATE ZIP (Home)							PHONE (Call Back Number)		
		RACE	SEX	AGE	DATE OF BIRTH	PLACE OF BIRTH	HEIGHT	WEIGHT	BUILD	HAIR	EYE
		H	M	39	6/18/1976		5'06"	175	MED	BLK	BRO
EMPLOYER / SCHOOL					OCCUPATION / RANK / GRADE				MILITARY N		
ADDRESS, CITY STATE ZIP (EMPLOYER / SCHOOL)							PHONE				
EMER		EMERGENCY CONTACT / NEXT OF KIN (LAST, FIRST MIDDLE)									
		EMERGENCY CONTACT / NEXT OF KIN'S ADDRESS, CITY STATE ZIP							PHONE		
ARREST		LOCATION OF ARREST, CITY STATE ZIP Brookdale CT, Vacaville, CA 95687									
		LOCATION OF OFFENSE, CITY STATE ZIP 408 Brookdale, Vacaville, CA 95687							OFFENSE DATE / TIME 06/14/2016 10:51		
		CITIZEN ARREST N	ARRESTING OFFICER Brennan		ID# 672	ADMONISHED BY	ID#	IS SUBJECT A SUSPECTED USER OF NARCOTICS/DRUGS N		INTERPRETER? / LANGUAGE No	
		DID YOU UNDERSTAND EACH OF THESE RIGHTS THAT I HAVE EXPLAINED TO YOU?							SUSPECT'S RELATION TO VICTIM(S)		
HAVING IN MIND AND UNDERSTANDING YOUR RIGHTS AS I HAVE TOLD YOU, ARE YOU WILLING TO TALK WITH US?									STATEMENT N		
ARRESTEE DESCRIPTION		HAIR LGTH/TYPE	HAIR STYLE	FACIAL HAIR	COMPLEXION	SPEECH	VOICE	DL: B6580028/CA			
		5. Short	8. Straight	4. Goatee				UNDOCUMENTED PERSON N			
		ADDITIONAL INFORMATION / FURTHER SUSPECT DESCRIPTION (I.E. GLASSES, TATTOOS, TEETH, BIRTHMARKS, JEWELRY, SCARS, ETC.)									
ARRESTEE VEHICLE		SUSPECT CLOTHING									
		ARRESTEE VEHICLE	YEAR	MAKE	MODEL	COLOR / COLOR	BODY TYPE	LICENSE NO.	LIC STATE		
		ADDITIONAL VEHICLE IDENTIFIERS (DAMAGE, CHROME WHEELS, ETC.)						VIN			
		REGISTERED OWNER (LAST, FIRST MIDDLE)						DISPOSITION OF VEHICLE			
REGISTERED OWNER'S ADDRESS, CITY STATE						IMPOUND? / TOWING COMPANY					
EV		SEE ATTACHED FORMS FOR ANY EVIDENCE, NARRATIVE, OR OTHER SUPPLEMENTAL INFORMATION.									
ADMIN		REPORTING OFFICER Brennan	ID# 672	DIVISION	APPROVED BY Senf	CONTROLLED DOCUMENT NO THIRD PARTY RELEASE VACAVILLE POLICE DEPT RSL TO: _____ BY: _____ DATE: _____					
		BOOKING APPROVED	ID#								

COMPANION	COMPANION'S NAME (LAST, FIRST MIDDLE)							
	ADDRESS, CITY STATE ZIP						PHONE	
	RACE	SEX	DATE OF BIRTH	ID TYPE	ID NUMBER	ID TYPE	ID NUMBER	ARRESTED

COMPANION	COMPANION'S NAME (LAST, FIRST MIDDLE)							
	ADDRESS, CITY STATE ZIP						PHONE	
	RACE	SEX	DATE OF BIRTH	ID TYPE	ID NUMBER	ID TYPE	ID NUMBER	ARRESTED

VICTIM / WITNESS	W-TYPE	VICTIM'S NAME (LAST, FIRST MIDDLE / OR ORGANIZATION)							
	RESIDENCE ADDRESS, CITY STATE ZIP						PHONE		
	RACE	SEX	DATE OF BIRTH	ID TYPE	ID NUMBER	ID TYPE	ID NUMBER	INTERPRETER?/LANGUAGE	RELATION TO: VICTIM SUSPECT
	STATUS	EMPLOYER / SCHOOL			OCCUPATION / RANK / GRADE		DAYS OFF	WORK HOURS	
	BUSINESS ADDRESS, CITY STATE ZIP						PHONE	V/W ASSIST	
	ADDITIONAL INFORMATION (VICTIM VEHICLE INFO. IF APPLICABLE)								

PARENT/GUARDIAN	NAME (LAST, FIRST MIDDLE)							PHONE
	LIVES WITH	ADDRESS, CITY STATE ZIP					PHONE	
	NAME (LAST, FIRST MIDDLE)							PHONE
	LIVES WITH	ADDRESS, CITY STATE ZIP					PHONE	

JUVENILE	SCHOOL	GRADE	NOTIFYING OFFICER		ID#	RELEASE DATE	
	ATTITUDE OF PARENTS / GUARDIAN			NOTIFICATION DATE		DETECTIVE DISPOSITION	
	ATTITUDE OF JUVENILE			HOW NOTIFIED		FIELD DISPOSITION	

CITIZEN ARREST	I HAVE ARRESTED:								
	I KNOW THAT PURSUANT TO SECTION 849 OF THE PENAL CODE OF THE STATE OF CALIFORNIA, IT IS NECESSARY FOR ME TO SIGN A COMPLAINT STATING THE CHARGE AGAINST THE PRISONER, WHICH COMPLAINT MUST BE MADE BEFORE A MAGISTRATE, AND I AGREE TO SIGN SAID COMPLAINT AND APPEAR IN SAID MATTER WITHOUT DELAY.								
	DATE: (COMPUTER GENERATED FORM, SIGNATURE NOT OBTAINED) DISCLAIMER READ TO THE CITIZEN?								
	ARRESTING CITIZEN NAME (LAST, FIRST MIDDLE)				RACE	SEX	DATE OF BIRTH	ID TYPE	ID NUMBER
	ADDRESS, CITY STATE ZIP						PHONE		

ADULT MISD ONLY	REASONS FOR NOT RELEASING THE SUBJECT WITH A WRITTEN NOTICE TO APPEAR							
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REPORTING OFFICER Brennan	ID# 672	DIVISION	APPROVED BY Senf	ID# 480	DATE AND TIME OF REPORT 06/14/2016 11:46
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CONTROLLED DOCUMENT
NO THIRD PARTY RELEASE
VACAVILLE POLICE DEPT
RSL TO: _____
BY: _____ DATE: _____

Vacaville Police Department – Use of Force Review Form

This report is based on the initial information available at the time the incident is reviewed.

Reviewing Supervisor: C. POLEN	Case # 2016-04704
Policy/Procedure 300 Followed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Needs Further Review (both boxes may be checked)	Date/Time: 5/14/16 1059
Location of Occurrence: 400 BROOKDALE CT.	Charges: PC 57(F), PC 148(c)(1), PC 1203.2
Suspect(s) Name and DOB(s): REYES, SMAR LARGO 5/18/1976	
Use of Force Information	
Primary Officer(s) using force: M. BRENNAN #672	
Other Involved Officer(s): N/A	
Reason for Initial Contact: Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Infraction <input checked="" type="checkbox"/> BOL/Wanted <input type="checkbox"/> Other <input type="checkbox"/> :	
Supervisor(s) on scene when use of force occurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes: Sgt/Lt.	
Supervisor – Use of Force statement obtained? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes: Statement Recorded and Attached? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Allied agency involved: None <input checked="" type="checkbox"/> CHP <input type="checkbox"/> SSO <input type="checkbox"/> FFLD <input type="checkbox"/> Other <input type="checkbox"/> :	
Force Used by Officer(s)	Force Used Which Gained Compliance
<input type="checkbox"/> Hand-Foot Striking Force <input type="checkbox"/> Chemical Agent <input type="checkbox"/> Taser <input type="checkbox"/> Baton <input type="checkbox"/> Canine <input type="checkbox"/> Vehicle <input type="checkbox"/> Less Lethal <input type="checkbox"/> Handgun <input type="checkbox"/> Carotid Restraint <input type="checkbox"/> Shotgun <input type="checkbox"/> Rifle <input checked="" type="checkbox"/> Other Force Used to Effect the Arrest: (If injury resulted, explain in synopsis) TACKLED IN EFFORT TO BRING TO GROUND	<input type="checkbox"/> Hand-Foot Striking Force <input type="checkbox"/> Chemical Agent <input type="checkbox"/> Taser <input type="checkbox"/> Baton <input type="checkbox"/> Canine <input type="checkbox"/> Vehicle <input type="checkbox"/> Less Lethal <input type="checkbox"/> Handgun <input type="checkbox"/> Carotid Restraint <input type="checkbox"/> Shotgun <input type="checkbox"/> Rifle <input checked="" type="checkbox"/> Other Force Used to Effect the Arrest: (If injury resulted, explain in synopsis) 11
Actions of Suspect	Other Factors Present (Check all that Apply)
<input type="checkbox"/> Cooperative <input checked="" type="checkbox"/> Uncooperative <input type="checkbox"/> Non Responsive <input type="checkbox"/> Passive Resistance <input checked="" type="checkbox"/> Active Resistance or Aggression/Assault or Threat of Assault <input type="checkbox"/> Life Threatening Assault of Likely to Cause Great Bodily Injury	<input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> 5150 <input type="checkbox"/> Other
Suspect Injuries	Forward for Review
<input type="checkbox"/> None <input checked="" type="checkbox"/> Injuries: <input checked="" type="checkbox"/> Visible <input type="checkbox"/> Complaint of pain <input checked="" type="checkbox"/> EMS Requested <input checked="" type="checkbox"/> Transported to Medical Facility <input type="checkbox"/> AMA at Scene: <input checked="" type="checkbox"/> Photographs <input checked="" type="checkbox"/> Video-Cam Recording	<input type="checkbox"/> Training – Training Unit <input type="checkbox"/> Policies & Procedures – Admin Services Division <input type="checkbox"/> Equipment – Training Manager <input type="checkbox"/> Office of Professional Standards <input type="checkbox"/> ARCON Supervisor <input type="checkbox"/> None
Officer Injured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Visible <input type="checkbox"/> Complaint of Pain Medical Treatment <input type="checkbox"/> Yes <input type="checkbox"/> No	
Notifications	
<input type="checkbox"/> Division Commander <input type="checkbox"/> Chaplain <input type="checkbox"/> Peer Support Program <input type="checkbox"/> Other:	

Entered in VOFF Report Carey 06/29/16

Synopsis of Use of Force

THE SUSPECT FLED FROM A BIKE STOP. HE WAS LATER LOCATED HIDING IN A BUSH AT 408 BROOKDALE CT. I ENGAGED IN A SHORT FOOT PURSUIT OF THE SUSPECT. I TACKLED THE SUSPECT IN THE SIDE YARD OF 579 GREGORY DR. THIS TOOK PLACE IN THE GRASS, BUT THE SUSPECT STRUCK HIS HEAD ON A DECORATIVE ROCK, CAUSING A 2.5CM. LACERATION. THE SUSPECT WAS ARRESTED & MEDICALLY
 Crime Report Attached CLEARED.

Staff Review/Comments

Comments: THE SUSPECT'S SUNGLASSES WERE LOCATED ON THE PLANTER BOXES WHERE THE INCIDENT OCCURRED. RESIDENT RAMIREZ, DANIEL AT 384 BROOKDALE CT COULD HEAR THE OFFICER TELL THE SUSPECT TO STOP!

SERGEANT/K-9 SUPERVISOR

Print Name:

E. RAMIREZ

Signature:



Date:

I agree with the Officer's Use of Force synopsis and found it to be within policy. No further action is necessary.

Forward for Review:

- Training - Training Unit
- Policies & Procedures - Admin Services Division
- ARCON Supervisor
- Office of Professional Standards
- See Attached Action Taken

Comments:

DIVISION COMMANDER

Print Name:

CHRIS POLEN

Signature:



Date:

6/20/16

I agree with the Sergeant's preliminary findings. No further action is necessary.

Forward for Review:

- Training - Training Unit
- Policies & Procedures - Admin Services Division
- ARCON Supervisor
- Office of Professional Standards
- See Attached Action Taken

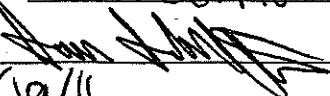
Comments:

BUREAU COMMANDER

Print Name:

Jan Schmutzler

Signature:



Date:

6/29/16

I agree with the Division Commander's preliminary findings. No further action is necessary.

Forward for Review:

- Training - Training Unit
- Policies & Procedures - Admin Services Division
- ARCON Supervisor
- Office of Professional Standards
- See Attached Action Taken

ROUTE TO OFFICE OF PROFESSIONAL STANDARDS WHEN ALL REVIEWS ARE COMPLETE