



# San Diego County Sheriff's Department

## Arrest/Juvenile Contact Report

CAD Event No.: **S9568597**Case No. **11154010**Case Disposition: **Arrest**Primary Victim: **State of California**Report No. **11154010.1****1**  
Page 1 of 6☒**ARREST REPORT**☐**JUVENILE CONTACT REPORT**WARRANT: ☐ LOCAL ☐ OUT**GENERAL CASE INFORMATION**

Primary Charge: <b>5150 - WI - MENTAL DISORDER 72 HR OBSERVATION</b>			
Special Studies:		Related Cases:	
Location, City, State, ZIP: <b>2275 Bosna Pl, Vista, CA 92084</b>		Occurred On: <b>11/01/2011 19:02:00 (Tuesday)</b>	
Jurisdiction: <b>Vista Uninc - VISTA</b>	Beat: <b>332</b>	Call Source: <b>ANI/ALI</b>	(and Between):
Means:		Motives:	

**VICTIM/S****IBR/UCR OFFENSE/S**

Offense Description: <b>5150 - WI - MENTAL DISORDER 72 HR OBSERVATION</b>	Level: <b>O</b>	Against:	Completed? <b>Yes</b>	Counts	Using: <b>N - Not Applicable</b>
Location Type: <b>201 - Apartment/Condo</b>	Hate/Bias: <b>88 - None (No Bias)</b>			Domestic Violence: <b>No</b>	
Criminal Activity:	Type Security:	Gang Related: <b>No</b>	Entry:	Point of Entry:	
Weapons/Force:	Tools:	Targets:			

**ARRESTEE/S****Arrestee #1**

Name: <b>Evans, Robert M</b>	County Residence: <b>R - Resident</b>	Interpreter Language: <b>EN - English</b>
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ALIAS / AKA / NICKNAME / MONIKER:									
Name Type:	First:	Middle:	Last:	Suffix:					
Home Address, City, State, ZIP: <b>(b)(5)(A)</b>				Res. Country: <b>US</b>	Place of Birth:	Undocumented: <b>No</b>			
Race: <b>W</b>	Sex: <b>M</b>	Date of Birth / Age: <b>(b)(5)(A) - 49</b>	Height: <b>5' 11"</b>	Weight: <b>170</b>	Hair Color: <b>BRO</b>	Eye Color: <b>BRO</b>	Facial Hair: <b>09 - Unshaven/Stubble</b>	Complexion: <b>LBR - Light Brown</b>	
Hair Style: <b>S - Straight</b>	Hair Length: <b>S - Short</b>	Build: <b>THI - Thin</b>	Teeth:	Suspected User:					
Employment Status: <b>U - Unemployed</b>	Occupation/Grade:	Employer/School:	Employer Address, City, State, ZIP:						

**CONTACT INFORMATION:**

Type: <b>HP - Home Phone</b>	Number/Address: <b>(b)(5)(A)</b>
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**IDENTIFICATION:**

Type: <b>SSN - SSN</b>	Number: <b>(b)(5)(A)</b>	State:	Country:
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**SCARS, MARKS, TATTOOS, ODDITIES:**

Attire:	Suspect Actions:
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**ARREST INFORMATION**

Arrest Type: <b>O - Probable Cause Arrest - New Case</b>	LE Disposition: <b>2 - Turned over to another LE agency (Adult / Juvenile)</b>	JUS 750 Type: <b>3 - Other</b>	Citation No.:	Booking No.:	
Arrested For: <b>5150 - WI - MENTAL DISORDER 72 HR OBSERVATION</b>			Level: <b>O</b>	Completed: <b>Yes</b>	Counts:
Arrested By: <b>SH9484 - BACKOURIS, NICHOLAS</b>	Arrest Date and Time: <b>11/01/2011 19:05:00</b>	Arrest Location, City, State, ZIP: <b>2275 Bosna Place, Vista, CA 92084</b>		Beat: <b>332</b>	
Arrest Assisted By:			Transported By: <b>SH9484 - BACKOURIS, NICHOLAS</b>		

Reporting Officer: <b>SH9484 - BACKOURIS, NICHOLAS</b>	Division / Organization: <b>Vista Station VISTA PATROL</b>	Reviewed By: <b>SH2544 - ARENS, MICHAEL</b>
Report Date: <b>11/2/2011 12:49:43 AM</b>	Detective Assigned: <b>PAULINO, MICHAELRAY</b>	Reviewed Date: <b>11/02/2011 05:21:41</b>



# San Diego County Sheriff's Department Arrest/Juvenile Contact Report

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Miranda Read:	Admonished By:	Miranda Response:	Jail Billing Code:	Booked Location:
<b>No</b>			<b>SD Sheriff's Office</b>	
Armed With:	Use of Force to effect Arrest:			
<b>01 - Unarmed</b>	<b>Yes</b>			
<b>JUVENILES</b>				
Adult Present:	Person Notified:	Juvenile Disposition:	Detention Name:	
Parents Notified By:	Notification Method:	Date and Time Notified:	Juvenile Released To:	
<b>RELEASE INFORMATION</b>				
Released Location:	Released On:	Released By:	Release Reason:	

## SUSPECT/S (Not Yet Arrested) WITNESSES

### Witness #1

Person Code:	<input type="checkbox"/> Secured Premise	<input type="checkbox"/> Discovered Crime	<input type="checkbox"/> Reporting Party	<input type="checkbox"/> Law Enforcement Officer		
Witness Type Code:	<input checked="" type="checkbox"/> 01-Arresting Officer	<input type="checkbox"/> 06-Other Lay Witness	<input type="checkbox"/> 07-Narc Chemist	<input type="checkbox"/> 12-Other Expert	<input type="checkbox"/> 13-Investigator	<input type="checkbox"/> 14-Other
Name:	Person Code:			County Residence:		
<b>Backouris, N</b>	<b>01 - Arresting Officer</b>					

ALIAS / AKA / NICKNAME / MONIKER:								
Name Type:	First:	Middle:	Last:	Suffix:				
Home Address, City, State, ZIP:				Res. Country:	Place of Birth:	Undocumented:		
<b>325 S Melrose, Vista, CA 92081</b>				<b>US</b>				
Race:	Sex:	Date of Birth / Age:	Height:	Weight:	Hair Color:	Eye Color:	Facial Hair:	Complexion:
Employment Status:	Occupation/Grade:	Employer/School:			Employer Address, City, State, ZIP:			
<b>E - Employed</b>	<b>Deputy Sheriff</b>	<b>SDSD</b>						
CONTACT INFORMATION:								
Type:	Number/Address:							
<b>WP - Work Phone</b>	<b>760 940-4551</b>							
IDENTIFICATION:								
Type:	Number:	State:			Country:			
<b>SH - Sheriff ID</b>	<b>9484</b>							
Injury:	Extent of Treatment:							

### Witness #2

Person Code:	<input type="checkbox"/> Secured Premise	<input type="checkbox"/> Discovered Crime	<input type="checkbox"/> Reporting Party	<input type="checkbox"/> Law Enforcement Officer		
Witness Type Code:	<input type="checkbox"/> 01-Arresting Officer	<input type="checkbox"/> 06-Other Lay Witness	<input type="checkbox"/> 07-Narc Chemist	<input type="checkbox"/> 12-Other Expert	<input type="checkbox"/> 13-Investigator	<input type="checkbox"/> 14-Other
Name:	Person Code:			County Residence:		
<b>(b)(5)(B)</b>				<b>R - Resident</b>		

ALIAS / AKA / NICKNAME / MONIKER:								
Name Type:	First:	Middle:	Last:	Suffix:				
Home Address, City, State, ZIP:				Res. Country:	Place of Birth:	Undocumented:		
<b>(b)(5)(B)</b>				<b>US</b>		<b>No</b>		
Race:	Sex:	Date of Birth / Age:	Height:	Weight:	Hair Color:	Eye Color:	Facial Hair:	Complexion:
Employment Status:	Occupation/Grade:	Employer/School:			Employer Address, City, State, ZIP:			
	<b>(b)(5)(B)</b>							
CONTACT INFORMATION:								
Type:	Number/Address:							
<b>MP - Mobile Phone</b>	<b>(b)(5)(B)</b>							
Type:	Number/Address:							
<b>WP - Work Phone</b>	<b>(b)(5)(B)</b>							

Reporting Officer	Division / Organization	Reviewed By
<b>SH9484 - BACKOURIS, NICHOLAS</b>	<b>Vista Station VISTA PATROL</b>	<b>SH2544 - ARENS, MICHAEL</b>
Report Date	Detective Assigned	Reviewed Date
<b>11/2/2011 12:49:43 AM</b>	<b>PAULINO, MICHAELRAY</b>	<b>11/02/2011 05:21:41</b>



# San Diego County Sheriff's Department Arrest/Juvenile Contact Report

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IDENTIFICATION:			
Type: <b>DLN - Drivers License Number</b>	Number: <b>(b)(5)(B)</b>	State: <b>CA</b>	Country: <b>US</b>
Injury:		Extent of Treatment:	

**OTHER ENTITIES****PROPERTY****Property Item #1.000 - CD pf photos**

Derivative No.: <b>0</b>	Property Category: <b>1311 - Recording - Interview or Case related - Video/Photo CD, DVD, Tape, Film, Digital storage, Negative</b>		
Status: <b>ES - Evidence (Seized)</b>	Count: <b>1</b>	Value:	
Manufacturer:	Model:		
Serial No.:	Model Year:	OAN:	
Color:	Caliber:		
Body Style:	Recovered/ Seized Date: <b>11/02/2011</b>		
Owner:	Disposition: <b>VPS evidence</b>		
Evidence Tag:	Alert(s):		
Drug Type:	Drug Quantity:		
Search Warrant:			
Notes:			

**REPORT NARRATIVE****SYNOPSIS:**

Robert Evans was arrested for 5150 WI and taken to Tri City medical center. Force as used to take Evans into custody, and he was treated at the hospital. Tri City medical center discovered Evans had a broken right collarbone, but was unsure if it was a result of the use of force or if it was an old injury.

**ORIGIN:**

On 11-1-2011 at about 1900 hours I responded to a radio call of a 5150 subject at 2275 Bosna place in the city of Vista, County of San Diego, CA. CAD S9568597

**BACKGROUND:**

None.

**INVESTIGATION:**

I arrived on scene and contacted the reporting party, (b)(5)(B). (b)(5) is the assistant administrator of the health care facility located at 2275 Bosna Place. The building appears to be a converted smaller apartment complex composed of maybe four or six units. (b)(5) was standing about 25 feet from the front door, and I could see a male standing in the open doorway frantically waving his arms

Reporting Officer <b>SH9484 - BACKOURIS, NICHOLAS</b>	Division / Organization <b>Vista Station VISTA PATROL</b>	Reviewed By <b>SH2544 - ARENS, MICHAEL</b>
Report Date <b>11/2/2011 12:49:43 AM</b>	Detective Assigned <b>PAULINO, MICHAELRAY</b>	Reviewed Date <b>11/02/2011 05:21:41</b>



# San Diego County Sheriff's Department Arrest/Juvenile Contact Report

Case No. **11154010**

CAD Event No.: **S9568597**

Case Disposition: **Arrest**

Primary Victim: **State of California**

Report No. **11154010.1**

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in the air and screaming. (b)(5)(A) identified the male as Robert Evans (b)(5)(A). I obtained a statement from (b)(5)(A).

## STATEMENTS:

### STATEMENT OF (b)(5)(A)

(b)(5)(A) said she has known Evans for about 8 years. Evans is a diagnosed paranoid schizophrenic and takes 4 mg of Risperdal daily, .5 mg Cosentin twice daily, .5 mg Klonopin as needed, and .5 g Ativan as needed. (b)(5)(A) said Evans has reunited with some old friends recently and has re-discovered methamphetamine. (b)(5)(A) said when Evans gets high, he get very unpredictable and occasionally violent. (b)(5)(A) said that Evans was hitting other residents earlier in the night, and actually bit another resident on the leg. (b)(5)(A) said that if she had to rate Evans violence tonight on a scale of one to ten in comparison to the prior occurrences, (b)(5)(A) rated Evans at a ten stating tonight is by far the most violent he has ever been.

## INVESTIGATION CONTINUED:

While I was speaking with (b)(5)(A) I could see Evans was beginning to move around a bit. I told Evans to sit down and he acted as if he didn't hear me. Evans was rambling all different sorts of nonsensical statements, including things about tanks, clouds, killing people, badges, "bullshit on the streets", and motorhomes. Evans was waiving his hands in the air nonstop, and appeared very agitated. (b)(5)(A) assured me that he would just stand there and continue in the same fashion unless something changed because that is just how his mind works. (b)(5)(A) attempted to move another resident, who required the use of a walker, away from Evans and Evans was startled by it. I felt that Evans was about to harm the resident, so I told Evans to sit down until my cover unit arrived. Evans acted as if he did not hear me, and continued being aggressive. I raised my voice and again told Evans to sit down. Evans immediately turned towards me yelled "I'm going to kill you" and began walking towards me quickly, still waiving his hands in the air. I gave Evans multiple verbal commands, including identifying myself as a Deputy Sheriff, told him to stop walking towards me, get on the ground, and to stop acting aggressive. Evans continued acting as if he did not hear a word I said, and was getting closer to me. I feared that if I did not stop Evans quickly, he was going to get very close to me and would be close enough to hurt me. I feared that if Evans was able to grab me, he was going to punch, kick, bite, or hurt me in some other fashion as he had done to other residents earlier in the night. I quickly approached Evans and used my right hand to grab Evans' right hand and maintain control of it. I used my left hand to grab the back of Evans' neck and gain control of his body. I could feel Evans trying to pull his right hand out of the grip of my right hand and attempt to escape my control. I used the control I had established by hands on control of Evans and placed him on the ground using an arm bar takedown. My academy training taught me that the most effective was of gaining control of resistive subjects if to take them to the ground. I fear that if I did not take Evans to the ground he would be able to escape my grasp and harm me or another person. Evans landed on his right shoulder and immediately complained of pain to his shoulder. Evans landed on a gravel surface, and I could see Evans had bleeding to the side of his face and head. I requested

Reporting Officer <b>SH9484 - BACKOURIS, NICHOLAS</b>	Division / Organization <b>Vista Station VISTA PATROL</b>	Reviewed By <b>SH2544 - ARENS, MICHAEL</b>
Report Date <b>11/2/2011 12:49:43 AM</b>	Detective Assigned <b>PAULINO, MICHAELRAY</b>	Reviewed Date <b>11/02/2011 05:21:41</b>



# San Diego County Sheriff's Department

## Arrest/Juvenile Contact Report

CAD Event No.: **S9568597**

Primary Victim: **State of California**

Case No. **11154010**

Case Disposition: **Arrest**

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the Vista fire department respond to the scene and evaluate Evans due to the complaint of pain and the minor bleeding.

Vista fire department arrived on scene and attempted to evaluate Evans, however Evans was very uncooperative and refused to cooperate with the fire department. Vista fire department was actually unable to communicate with Evans because he was continually mumbling inaudible noises, then would begin crying. Vista fire department suggested that if Evans was going to be taken on a 5150 hold that the hospital would simply treat any injuries he sustained. I signed a release taking custody of Evans and placed him under arrest per 5150 WI. I read Evans the 5150 admonishment directly off of the 5150 hold form, and he had no response when I asked him if he understood. I notified my supervisor that force was used to defend myself and to gain custody and control of Evans before I left the scene. I transported Evans to Tri City medical center where he was released to their custody for a mental health evaluation at about 1940 hours.

I was notified at about 2300 hours by Tri City Medical center that Evans had a broken right clavicle that might have been a result of the use of force. I notified my supervisor at about 0300 hours on 11-2-2011 and I returned to Tri City medical Center. Evans had been moved from room 11 to a gurney in the hallway and was asleep when I got there. Nurses showed me the injury to Evans' shoulder, and I photographed it for evidence. The charge nurse told me that they had not given Evans any medications since he arrived. I was still unable to communicate with Evans, and he would only mumble when I asked him questions. An emergency room doctor arrived and examined Evans' clavicle. The doctor said the due to how the injury was bruising, the broken clavicle could possibly be an old injury, but was aggravated during the use of force. Tri City order a CT scan and was going to investigate the injury further. I did not believe Evans was mentally capable of signing a medical records release form, so I did not complete the release form.

### EVIDENCE:

1 CD of photos and recordings

### INJURIES:

Evans sustained abrasions to his right shoulder, right side of his head, and a broken right clavicle. He was treated by Tri City medical center

### PROPERTY DAMAGE:

None.

### FOLLOW-UP INVESTIGATION:

None.

Reporting Officer <b>SH9484 - BACKOURIS, NICHOLAS</b>	Division / Organization <b>Vista Station VISTA PATROL</b>	Reviewed By <b>SH2544 - ARENS, MICHAEL</b>
Report Date <b>11/2/2011 12:49:43 AM</b>	Detective Assigned <b>PAULINO, MICHAELRAY</b>	Reviewed Date <b>11/02/2011 05:21:41</b>



## San Diego County Sheriff's Department Arrest/Juvenile Contact Report

Case No. **11154010**

CAD Event No.: **S9568597**

Case Disposition: **Arrest**

Primary Victim: **State of California**

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### RELATED REPORTS:

5150 Hold

Reporting Officer <b>SH9484 - BACKOURIS, NICHOLAS</b>	Division / Organization <b>Vista Station VISTA PATROL</b>	Reviewed By <b>SH2544 - ARENS, MICHAEL</b>
Report Date <b>11/2/2011 12:49:43 AM</b>	Detective Assigned <b>PAULINO, MICHAELRAY</b>	Reviewed Date <b>11/02/2011 05:21:41</b>



# San Diego County Sheriff's Department Officer Report

CAD Event No. **S9568597**Case No. **11154010**Report No. **2613****1**

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**GENERAL CASE INFORMATION**

Special Studies:		Related Cases:	
Location, City, State, ZIP: <b>2275 Bosna Pl,</b>		Occurred On: <b>11/2/2011 3:00:00 AM (Wednesday)</b>	
Jurisdiction: <b>Vista Uninc - VISTA</b>	Beat: <b>332</b>	Call Source:	(and Between):

**INDIVIDUAL/S****REPORT NARRATIVE****ORIGIN:**

On 11/2/11, at about 0300 hours, I was notified by Deputy Backouris that Robert Evans (b)(5), who he detained for a 5150 W&I hold, had a broken clavicle. (Event # S9569117)

**DEPUTY'S OBSERVATIONS AND ACTIONS:**

Deputy Backouris advised me he had received a radio call around 2300 hours that notified him Evans had sustained a broken bone that possibly occurred when he was arrested. Deputy Backouris had already briefed me on the Evans arrest earlier in the day. Deputy Backouris had advised me he had used an arm bar to take Evans to the ground after Evans came toward him waving his arms and stating he was going to kill him. At the time, Deputy Backouris had seen abrasions on Evans face after he was taken to the ground and requested the fire department evaluate him. Evans was uncooperative with the fire department and they decided the best course of action was for Deputy Backouris to transport Evans to the hospital on the 5150 hold and the hospital would care for his abrasions.

I responded to the hospital to contact Evans and inspect his injuries. I arrived on scene, at about 0314 hours, and was briefed by medical staff that Evans had a broken clavicle. Per the medical staff it was unknown if the injury occurred during the arrest or if it was an older injury. I attempted to speak with Evans and digitally recorded my attempt. Evans would only mumble incoherently. The medical staff advised me they had not given Evans any medication and his TOX screen came back clean.

I called and spoke to Sgt. Menzies from the Department of Inspectional Services and notified him of the incident. Later at the Vista Patrol Station, I transferred the digital recording to the NetRMS URL. Deputy Backouris transferred the digital recording to a CD which was placed into evidence at the Vista Patrol Station.

Reporting Officer <b>SH2544 - ARENS, MICHAEL</b>	Division / Organization <b>VPS_PAT / VPS - Vista Station</b>	Reviewed By <b>SH2525 - SMITH JR, ROBERT</b>
Report Date <b>11/2/2011 3:52:43 AM</b>	Detective Assigned <b>PAULINO, MICHAELRAY</b>	Reviewed Date <b>11/2/2011 5:44:11 AM</b>



# San Diego County Sheriff's Department Evidence Report

Case No: **11154010**Evidence Sheet No: **001****1**

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**GENERAL CASE INFORMATION**

REPORTING AGENCY: <b>SH - Sheriff</b>				
CALL FOR SERVICE NUMBER (CAD) <b>S9568597</b>	OFFENSE TYPE: <b>5150 - WI - MENTAL DISORDER 72 HR OBSERVATION</b>	DIVISION: <b>EVD - Property &amp; Evidence Unit</b>	BILLING CODE: <b>SDSO - SD Sheriff's Office</b>	SEARCH WARRANT NUMBER:
DATE OF INCIDENT: <b>11/1/2011</b>	INCIDENT LOCATION (CITY, STATE, ZIP): <b>VS-V; 2275 BOSNA PL, VISTA, CA 92084</b>			KEY CASE NUMBER:
REPORTING OFFICER: <b>SH9484 - BACKOURIS, NICHOLAS</b>		ID: <b>SH9484</b>	DIVISION: <b>Lemon Grove Substation</b>	
ASSIGNED DETECTIVE: <b>PAULINO, MICHAELRAY</b>		ID:	DIVISION: <b>Property &amp; Evidence Unit</b>	

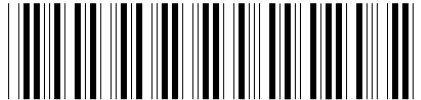
**OUTSIDE AGENCY**

OA CASE NUMBER:	AGENCY NAME:	ASSIGNED DETECTIVE:	CONTACT PHONE:
	AGENCY ADDRESS (CITY, STATE, ZIP):		

**INVOLVED PEOPLE**

AFFILIATION: <b>SUS1</b>	NAME (Last, First, Middle): <b>EVANS, ROBERT M</b>	DOB: <b>(b)(5)(A)</b>	AGE: <b>49</b>	SEX: <b>M - Male</b>	RACE:
	HOME ADDRESS (CITY, STATE, ZIP): <b>(b)(5)(A)</b>	HOME PHONE:			

**EVIDENCE INFORMATION SECTION**

FIN <b>1.1</b>	OA Item/TAG #	PROPERTY DESCRIPTION: <b>COMPACT DISK (CD OF PHOTOS)</b>		 <b>* I 1 2 1 8 4 4 5 *</b>	
VALUE:	QUANTITY: <b>0</b>	MAKE / MANUFACTURER:	MODEL:		
CALIBER:	SERIAL NUMBER:	PROPERTY TYPE: <b>1302 - Compact Disc Player</b>			
PROPERTY STATUS: <b>ES - Evidence (Seized)</b>		SEARCH WARRANT:			
PROPERTY DISPOSITION: <b>Disposed</b>		DATE/TIME RECD / SEIZED: <b>11/2/2011</b>		CSI	PFIN
DRUG TYPE:		DRUG QUANTITY:		DRUG MEASURE:	
NOTES:					



# San Diego County Sheriff's Department

## Use of Force Supplemental

UOF DATE AND TIME 11/1/2011 19:00	EVENT NUMBER S9568597	CASE NUMBER 11154010	DOCUMENT NUMBER 2607	STATION/FACILITY VPS - Vista Station
INCIDENT DESCRIPTION / OFFENSES 5150 Violent				
SUBJECT'S NAME (LAST, FIRST, MI) Evans, Robert M		DATE OF BIRTH (b)(5)(A)	ARRESTED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	SUPERVISOR PRESENT <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
DATE/TIME SUPERVISOR NOTIFIED 11/01/2011 19:06				
<b>REASON(S) FOR USING FORCE:</b> <input type="checkbox"/> Necessary to effect an arrest <input type="checkbox"/> Necessary to prevent a violent forcible felony <input type="checkbox"/> Delaying Jail Operations <input checked="" type="checkbox"/> Necessary to defend self or another <input type="checkbox"/> Necessary to restrain for subject's safety <input type="checkbox"/> Necessary to prevent escape/evasion <input type="checkbox"/> Necessary during high-risk incident <input type="checkbox"/> Necessary to effect a lawful detention <input type="checkbox"/> Necessary during riot				
SUBJECT APPEARED TO BE <input type="checkbox"/> Under the influence of alcohol and/or drugs <input checked="" type="checkbox"/> Mentally impaired		NUMBER OF OFFICERS ON SCENE 1		NUMBER OF OFFICERS USING FORCE 1
LEVEL(S) OF RESISTANCE ENCOUNTERED <input type="checkbox"/> NONE (subject cooperated/complied) <input checked="" type="checkbox"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <input checked="" type="checkbox"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <input type="checkbox"/> PASSIVE RESISTANCE (represents by a refusal to respond to verbal commands but also offers no form of physical resistance) <input checked="" type="checkbox"/> ACTIVE RESISTANCE (pushing, pulling or running away from the officer to avoid control; not attempting to harm the officer) <input checked="" type="checkbox"/> ASSAULTIVE BEHAVIOR (physical actions of assault) <input type="checkbox"/> AGGRAVATED ACTIVE AGGRESSION (potential injury or death)				
LAW ENFORCEMENT TOOL/TECHNIQUE USED TO GAIN COMPLIANCE OR OVERCOME RESISTANCE (CHECK ALL THAT APPLY) <input checked="" type="checkbox"/> Verbal Commands: Sheriff's Dept, don't come near me, stay back, get away from me, don't grab my hands				
<input checked="" type="checkbox"/> Empty Hand Control <input type="checkbox"/> Grab, Push, Pull, or Body Weight <input checked="" type="checkbox"/> Control Hold (Duration: 30 seconds) <input type="checkbox"/> Pressure Point (Duration: ) (# of Contacts: ) <input type="checkbox"/> Strike (Body part used: ) (# of Contacts: ) <input checked="" type="checkbox"/> Takedown Type: arm bar takedown <input type="checkbox"/> Carotid (Rendered Unconscious? <input type="checkbox"/> Yes <input type="checkbox"/> No) (Duration: ) <input type="checkbox"/> Tool/Device/Weapon <input type="checkbox"/> OC Agent (Duration: ) (# of Contacts: ) <input type="checkbox"/> Decontaminated <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cord Cuff Restraint Device (Duration: ) <input type="checkbox"/> Impact Weapon (# of Contacts: ) Type: _____ <input type="checkbox"/> Canine (Duration: ) (# of Contacts: ) <input type="checkbox"/> Vehicle/Forcible Stop <input type="checkbox"/> Weapon Pointed at Subject (Duration: ) Type: _____ <input type="checkbox"/> Spit Sock (Duration: ) <input type="checkbox"/> Pro-Strait Chair <input type="checkbox"/> Tactical Shield <input type="checkbox"/> WRAP				
<input type="checkbox"/> Less-Lethal Weapon System Discharged <input type="checkbox"/> PepperBall - OC Powder <input type="checkbox"/> PepperBall - Water <input type="checkbox"/> 37 mm Rifle - Standard <input type="checkbox"/> 37 mm Rifle - Low Energy <input type="checkbox"/> 40 mm Rifle - Bean Bag <input type="checkbox"/> 40 mm Rifle - Sponge <input type="checkbox"/> Taser - Probes <input type="checkbox"/> Taser - Drive Stuns <input type="checkbox"/> Stingball Grenade <input type="checkbox"/> Sound/Light device <input type="checkbox"/> 12-Gauge Super Sock <input type="checkbox"/> Ultron/NOVA Shield <input type="checkbox"/> REACT Belt Discharges _____ Number of Contacts _____ Target Distance _____				
<input type="checkbox"/> Firearm <input type="checkbox"/> Type: _____ <input type="checkbox"/> Other: _____				
WAS INITIAL USE OF FORCE EFFECTIVE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No WAS ADDITIONAL CONTROL OR FORCE NEEDED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
SUBJECT INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input checked="" type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
OFFICER(S) INJURED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		EXTENT OF TREATMENT <input checked="" type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
SUBJECT INJURY DESCRIPTION		OFFICER INJURY DESCRIPTION		
OTHER FORCE USED/COMMENTS/EQUIPMENT PERFORMANCE: Evans has a broken right clavicle. At the time of this report it is unknown if the use of force caused the injury.				
SERGEANT		ARJIS	DATE	
LIEUTENANT		ARJIS	DATE	
CAPTAIN		ARJIS	DATE	

MARK FIGURE TO INDICATE CONTACT POINT(S)



# San Diego County Sheriff's Department

## Use of Force Supplemental

### Use of Force Supplemental Instructions

**Lines 1 & 3:** Fill in the blanks.

**Line 2:** If the suspect was committing a crime and force was used to stop or apprehend the subject, document the appropriate penal code. If the UOF occurred in the performance of the officer's duties, document the incident description, i.e. officer transport, officer escort, making arrest, detaining suspect, cell extraction etc.

**Primary Reason for Using Force:** Check appropriate box(s).

**Subject Appeared To Be:** Check if applicable.

**Number of Officers on Scene:** List number of officers present.

**Number of Officers Using Force:** List number of officers that used force.

**Level(s) of Resistance Encountered:** Check appropriate box(s).

**L.E. Tool/Technique Used:** Check appropriate box(s). If known and/or applicable, include duration (approximate length of time) tool/technique was used. If known and/or applicable, include the number of contacts (approximate number of strikes, impacts, etc.) when requested on form.

**Was Initial Use of Force Effective?** If initial force used was effective, check "Yes." If initial force used was ineffective and additional force was necessary, check "No."

**Was Additional Control or Force Needed:** If initial force used was ineffective and additional force was necessary, check "Yes." If initial force used was effective, check "No."

**Target Distance:** If applicable (refers primarily to less lethal weapon systems), approximate distance or provide range (i.e. 7-15 feet, 15-20 yards, etc.) from subject during application of force.

**Subject Injured:** Check "Yes" if medically treated for injury sustained as a possible result of force applied by a officer(s) – does not include previous injuries suffered prior to officer contact. Check "No" if subject was not injured or simply complains of injury/pain suffered as a result of force applied by an officer(s) and refuses medical attention. Any complaints of pain shall be documented in the use of force report narrative (whenever any physical force used by a officer results in a complaint of injury or an injury that necessitates medical treatment of a subject, a supervisor will be notified immediately).

**Extent of Treatment:** Check appropriate box. Check none if subject was evaluated and no treatment was required. Specifically, check "Treated at Scene" if subject was treated at scene by EMS for injuries that may have resulted due to force applied by officer(s). Check "Treated at Hospital" if subject was transported to hospital for treatment of injuries that may have been sustained as an apparent result of force applied by officer(s). Check "Hospitalized" if subject was admitted to the Hospital as a result of injuries that were sustained as a result of force applied by officer(s).

**Officer Injured:** Check appropriate box (see above).

**Extent of Treatment:** Check appropriate box. Check none if officer was evaluated and no treatment was required. Specifically, check "Treated at Scene" if officer was treated at scene by EMS for injuries. Check "Treated at Hospital" if officer was transported to hospital for treatment of injuries. Check "Hospitalized" if officer was admitted to the Hospital as a result of injuries.

**Other Force Used/Comments/Equipment Performance:** This section can be used to document other force options not listed on the form; relevant comments about the incident such as complaints of pain/injury (room permitting) and negative/positive comments regarding equipment performance.

**Mark Figure to Indicate Contact Points:** When applicable, mark the areas on the figure where applied force contacted the subject's body.

**Sergeant:** Sign, list ARJIS number and date reviewed.

**Lieutenant:** Sign, list ARJIS number and date reviewed.

**Captain:** Sign, list ARJIS number and date reviewed.



# San Diego County Sheriff's Department Officer Report

CAD Event No. **S9568597**Case No. **11154010**Report No. **2607****1**

Page 1 of 1

**GENERAL CASE INFORMATION**

Special Studies:		Related Cases:	
Location, City, State, ZIP: <b>2275 Bosna Place, Vista, CA 92084</b>		Occurred On: <b>11/1/2011 7:00:00 PM (Tuesday)</b>	
Jurisdiction: <b>Vista Uninc - VISTA</b>	Beat: <b>332</b>	Call Source:	(and Between):

**INDIVIDUAL/S**

Name: <b>Evans, Robert M</b>				Person Code:		Interpreter Language:	
ALIAS / AKA / NICKNAME / MONIKER:							
Home Address, City, State, ZIP: <b>(b)(5)(A)</b>				Res. Country: <b>US - UNITED STATES</b>		County Residence: <b>R Resident</b>	
Race: <b>W</b>		Sex: <b>M</b>		Date of Birth / Age: <b>(b)(5)(A) - 49</b>		Height: <b>5' 11"</b>	
Weight: <b>170 lbs</b>		Hair Color: <b>BRO</b>		Eye Color: <b>BRO</b>		Facial Hair: <b>09 - Unshaven/Stubble</b>	
Complexion:		Employment Status:		Occupation/Grade:		Employer/School:	
Employer Address, City, State, ZIP:							
CONTACT INFORMATION							
Type: <b>HP - Home Phone</b>				Number/Address: <b>(b)(5)(A)</b>			
IDENTIFICATION:							
Type: <b>SSN - SSN</b>		Number: <b>(b)(5)(A)</b>		State:		Country:	
Attire:		Injury: <b>Yes</b>		Extent Of Treatment: <b>4 - Hospitalized</b>		Violent Crime Circumstances:	
Subject Injury Description:							
Officer Injury Description:							

**REPORT NARRATIVE**

see report

Reporting Officer <b>SH9484 - BACKOURIS, NICHOLAS</b>	Division / Organization <b>VPS_PAT / VPS - Vista Station</b>	Reviewed By <b>SH2544 - ARENS, MICHAEL</b>
Report Date <b>11/2/2011 1:12:15 AM</b>	Detective Assigned <b>PAULINO, MICHAELRAY</b>	Reviewed Date <b>11/2/2011 6:04:10 AM</b>

Tri-City Medical Center

(b)(5)



Pt: Evans, Robert F

(b)(5)(C)



49 Year

Male











