



San Diego County Sheriff's Department

Arrest/Juvenile Contact Report

CAD Event No.: **S9568597** Case No.: **11154010**
 Primary Victim: **State of California** Case Disposition: **Arrest**
 Report No.: **11154010.1**

<input checked="" type="checkbox"/> ARREST REPORT	<input type="checkbox"/> JUVENILE CONTACT REPORT	WARRANT: <input type="checkbox"/> LOCAL <input type="checkbox"/> OUT
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GENERAL CASE INFORMATION

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

VICTIM/S

IBR/UCR OFFENSE/S

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

ARRESTEE/S

Arrestee #1

Name: Evans, Robert M	County Residence: R - Resident	Interpreter Language: EN - English
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ALIAS / AKA / NICKNAME / MONIKER:

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

CONTACT INFORMATION:

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

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

Attire:	Suspect Actions:
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ARREST INFORMATION

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

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



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Miranda Read: No	Admonished By:	Miranda Response:	Jail Billing Code: SD Sheriff's Office	Booked Location:
Armed With: 01 - Unarmed		Use of Force to effect Arrest: Yes		
JUVENILES				
Adult Present:	Person Notified:	Juvenile Disposition:	Detention Name:	
Parents Notified By:	Notification Method:	Date and Time Notified:	Juvenile Released To:	
RELEASE INFORMATION				
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: Backouris, N	Person Code: 01 - Arresting Officer	County Residence:	

ALIAS / AKA / NICKNAME / MONIKER:				
Name Type:	First:	Middle:	Last:	Suffix:
Home Address, City, State, ZIP: 325 S Melrose, Vista, CA 92081		Res. Country: US	Place of Birth:	Undocumented:
Race:	Sex:	Date of Birth / Age:	Height:	Weight:
			Hair Color:	Eye Color:
			Facial Hair:	Complexion:
Employment Status: E - Employed	Occupation/Grade: Deputy Sheriff	Employer/School: SDSD	Employer Address, City, State, ZIP:	
CONTACT INFORMATION:				
Type: WP - Work Phone	Number/Address: 760 940-4551			
IDENTIFICATION:				
Type: SH - Sheriff ID	Number: 9484	State:	Country:	
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: (b)(5)(B)	Person Code:	County Residence: R - Resident	

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

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



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

OTHER ENTITIES

PROPERTY

Property Item #1.000 - CD pf photos

Derivative No.: 0	Property Category: 1311 - Recording - Interview or Case related - Video/Photo CD, DVD, Tape, Film, Digital storage, Negative		
Status: ES - Evidence (Seized)	Count: 1	Value:	
Manufacturer:	Model:		
Serial No.:	Model Year:	OAN:	
Color:	Caliber:		
Body Style:	Recovered/ Seized Date:	11/02/2011	
Owner:	Disposition: VPS evidence		
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)(B)** 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)(B)** was standing about 25 feet from the front door, and I could see a male standing in the open doorway frantically waving his arms

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

STATEMENTS:

STATEMENT OF (b)(5)

(b) 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) said Evans has reunited with some old friends recently and has re-discovered methamphetamine. (b) said when Evans gets high, he get very unpredictable and occasionally violent. (b) said that Evans was hitting other residents earlier in the night, and actually bit another resident on the leg. (b) said that if she had to rate Evans violence tonight on a scale of one to ten in comparison to the prior occurrences, (b) 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) 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) 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) 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

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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.

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RELATED REPORTS:

5150 Hold

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Report No. **2613**

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GENERAL CASE INFORMATION

Special Studies:		Related Cases:	
Location, City, State, ZIP: 2275 Bosna Pl,		Occurred On: 11/2/2011 3:00:00 AM (Wednesday)	
Jurisdiction: Vista Uninc - VISTA	Beat: 332	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 SH2544 - ARENS, MICHAEL	Division / Organization VPS_PAT / VPS - Vista Station	Reviewed By SH2525 - SMITH JR, ROBERT
Report Date 11/2/2011 3:52:43 AM	Detective Assigned PAULINO, MICHAELRAY	Reviewed Date 11/2/2011 5:44:11 AM



San Diego County Sheriff's Department Evidence Report

Case No: **11154010**

Evidence Sheet No: **001**

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GENERAL CASE INFORMATION

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

OUTSIDE AGENCY

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

INVOLVED PEOPLE

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

EVIDENCE INFORMATION SECTION

FIN 1.1	OA Item/TAG #	PROPERTY DESCRIPTION: COMPACT DISK (CD OF PHOTOS)		 * I 1 2 1 8 4 4 5 *	
VALUE:	QUANTITY: 0	MAKE / MANUFACTURER:	MODEL:		
CALIBER:	SERIAL NUMBER:	PROPERTY TYPE: 1302 - Compact Disc Player			
PROPERTY STATUS: ES - Evidence (Seized)		SEARCH WARRANT:			
PROPERTY DISPOSITION: Disposed		DATE/TIME RECVRD / SEIZED: 11/2/2011	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																																																							
REASON(S) FOR USING FORCE: <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;"><input type="checkbox"/> Necessary to effect an arrest</td> <td style="width: 25%;"><input checked="" type="checkbox"/> Necessary to defend self or another</td> <td style="width: 25%;"><input type="checkbox"/> Necessary to prevent escape/evasion</td> <td style="width: 25%;"><input type="checkbox"/> Necessary to effect a lawful detention</td> </tr> <tr> <td><input type="checkbox"/> Necessary to prevent a violent forcible felony</td> <td><input type="checkbox"/> Necessary to restrain for subject's safety</td> <td><input type="checkbox"/> Necessary during high-risk incident</td> <td><input type="checkbox"/> Necessary during riot</td> </tr> <tr> <td><input type="checkbox"/> Delaying Jail Operations</td> <td colspan="3"></td> </tr> </table>					<input type="checkbox"/> Necessary to effect an arrest	<input checked="" type="checkbox"/> Necessary to defend self or another	<input type="checkbox"/> Necessary to prevent escape/evasion	<input type="checkbox"/> Necessary to effect a lawful detention	<input type="checkbox"/> Necessary to prevent a violent forcible felony	<input type="checkbox"/> Necessary to restrain for subject's safety	<input type="checkbox"/> Necessary during high-risk incident	<input type="checkbox"/> Necessary during riot	<input type="checkbox"/> Delaying Jail Operations																																															
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<input type="checkbox"/> Delaying Jail Operations																																																												
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 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"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <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"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <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: <u>arm bar takedown</u> <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 <table style="width: 100%; border: none;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 10%;">Discharges</th> <th style="width: 10%;">Number of Contacts</th> <th style="width: 20%;">Target Distance</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/> PepperBall - OC Powder</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> PepperBall - Water</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> 37 mm Rifle - Standard</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> 37 mm Rifle - Low Energy</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> 40 mm Rifle - Bean Bag</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> 40 mm Rifle - Sponge</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> Taser - Probes</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> Taser - Drive Stuns</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> Stingball Grenade</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> Sound/Light device</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> 12-Gauge Super Sock</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> Ultron/NOVA Shield</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> REACT Belt</td><td>_____</td><td>_____</td><td>_____</td></tr> </tbody> </table>						Discharges	Number of Contacts	Target Distance	<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	_____	_____	_____
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<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	EXTENT OF TREATMENT	OFFICER(S) INJURED	EXTENT OF TREATMENT																																																									
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<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.		<p style="text-align: center;">MARK FIGURE TO INDICATE CONTACT POINT(S)</p>																																																										
SERGEANT		ARJIS	DATE																																																									
LIEUTENANT		ARJIS	DATE																																																									
CAPTAIN		ARJIS	DATE																																																									



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: 2275 Bosna Place, Vista, CA 92084		Occurred On: 11/1/2011 7:00:00 PM (Tuesday)	
Jurisdiction: Vista Uninc - VISTA	Beat: 332	Call Source:	(and Between):

INDIVIDUAL/S

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

REPORT NARRATIVE

see report

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

Tri-City Medical Center

(b)(5)



Pt: Evans, Robert F

(b)(5)(C)



49 Yrs

Male











