



SUPERVISORY TASER USE REPORT

Suspect Name:	James Raymond	Report Date:	12/13/2012
Location:	79 West Canal Street Winooski	Booked:	Yes
Officer's Name:	Michael Cram	Charges:	Agg Aslt PO / Possession Stimulant
Supervisor:	Chief McQueen	Sgt.:	Chief McQueen
Medical Facility:	Saint Michaels Rescue	TASER Serial #:	X290006MT
OR#:		Doctor:	
		Fire DR#:	

Date of the Incident:	13-Dec	Time of Incident:	1058
Location of the Incident:	Peking Duck House 79 West Canal Street Winooski VT 05404		
Officer(s) Involved:	Cram, Machavern, Davis		
Nature of the Call or Incident:	Trespass		

Type of Subject: Human Animal

Type of Force Used in addition to TASER (Check all that apply):
 OC/Chemical Physical Baton Impact Munition Firearm

Nature of the Injuries and Medical Treatment Required:	Medical Evaluation by Rescue
Admitted to Hospital for Injuries:	No
Admitted to Hospital for Psychiatric:	No
Medical Exam:	Yes
Summary of the Actions of Officer(s) Involved:	Foot pursuit and physical altercation that resulted in officer being subjected to a bite from suspect on hand then deployment of Taser
Was an Officer, Law Enforcement Employee Injured?:	Yes

Incident Type [check appropriate response(s) below]
 Civil Disturbance Violent Suspect Warrant Service
 Suicidal Barricade Other

Age:	32	Sex:	Male
Height:	6' 00" 155 lbs	Race:	White

Build: Heavy Medium Trim
Suspect wearing heaving clothes: Yes

TASER Application: Actual Use Arc Display Only Display Only
TASER Use Mode: Dart Probe Contact Touch Stun Contact

Type of TASER Device [check appropriate response(s) below]
 Taser X2 ADVANCED TASER M26

If ADVANCED TASER M26 what type of batteries (not TASER X26) [check appropriate response(s) below]
 Rechargeable NiMH Alkaline

Type of AIR CARTRIDGE [check appropriate response(s) below]
 21-Ft Standard 21-Ft XP 15-Ft AC
 25-Ft Standard 25-Ft XP 35-Ft AC

25-Ft Standard 25-Ft XP 35-Ft AC

Was a TASER CAM Attached to the TASER X26? [check appropriate response(s) below]

TASER CAM Used NO TASER CAM

Approximate target distance at the time of the dart launch:

Need for an additional shot?:

Did dart contacts penetrate the subject's skin?:

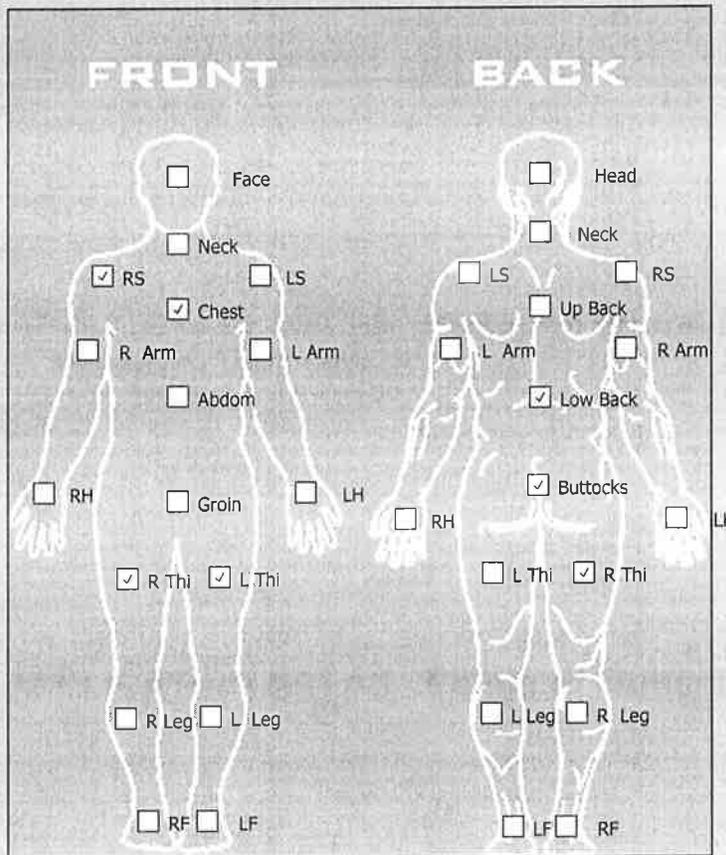
Regarding the TASER X/M26:

Did the application cause injury:

If yes, was the subject treated for the injury?:

DESCRIPTION OF INJURY:

APPLICATION AREAS - Points of contact



SYNOPSIS:

First deployment into lower back and buttocks area. One probe penetration due to heavy clothing. Second deployment same area. Single probe penetration, followed up with a drive stun to the right rear thigh.

Need for additional applications?:

Did the device respond satisfactorily?:

If the TASER deployment was unsuccessful was a DRIVE STUN followup used?

Describe the subject's demeanor after the device was used or displayed?

Initial cartridge deployment had no affect. Follow up cartridge and drive stun provided NMI lockup

Suspect Under the influence:
Confirmed by:

Describe the danger present:
Subject refused to comply to multiple verbal commands. Physical altercation ensued with defendant biting officers right hand with mouth.

Describe other means attempted to control the subject: (If not used, explain)

Chemical Spray Used?:
Explanation:

Baton or Blunt Instrument?:
Explanation:

Authorized control holds?:

Photographs Taken?:
If not, explain:

Report Completed by: X _____
Signature (Hard Copy)

ADDITIONAL INFORMATION

Reference Case #12WS006111

INSTRUCTIONS:

1. Save this file to your hard drive. It will not email properly until after being saved.
2. Submit this report to the national TASER technology incident database.

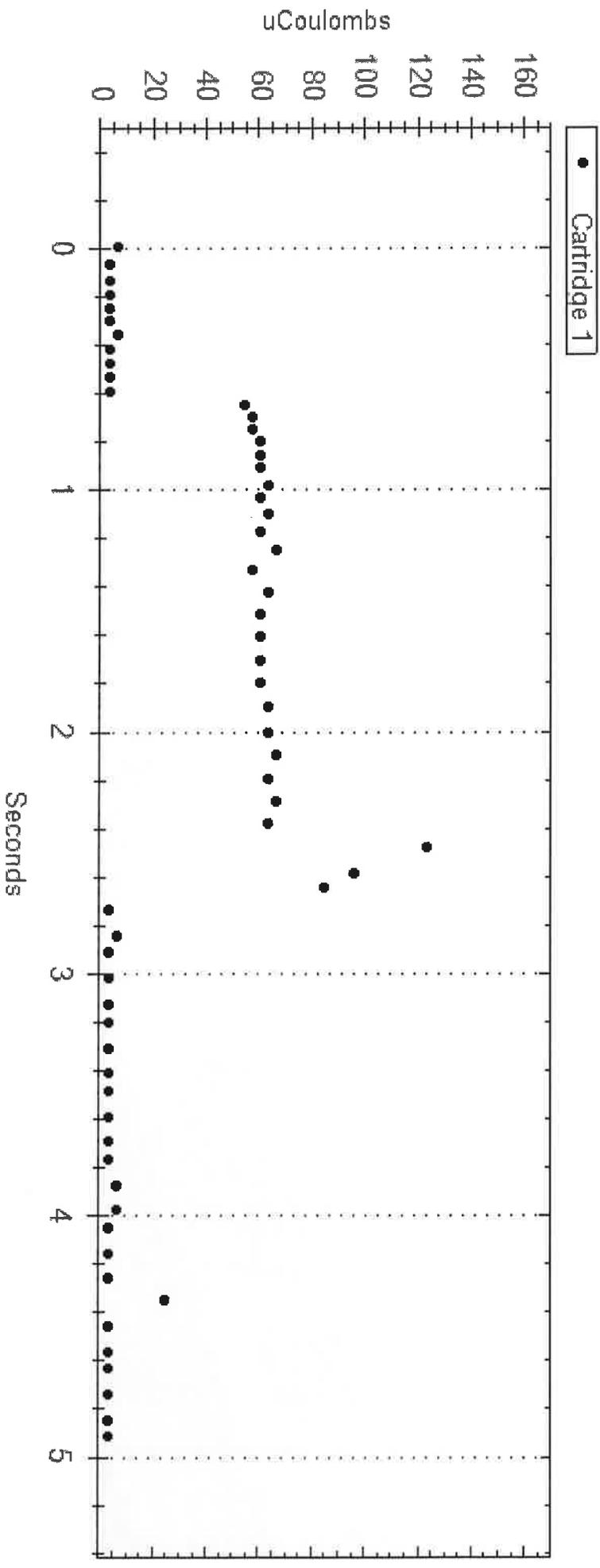
Email to: Andrew@TASER.com

Click "File" -> "Send" -> "Mail Recipient" (send to: Andrew@TASER.com)

3. If you cannot email, please fax this report to: (480) 991-0791 Attn: Andrew Hinz, 800-978-2737 ext. 2048
4. Save a copy of this report to your department archives.
5. Print and sign a copy of this report and deliver to supervising officer for filing in department records.

Bay 1 Charge*

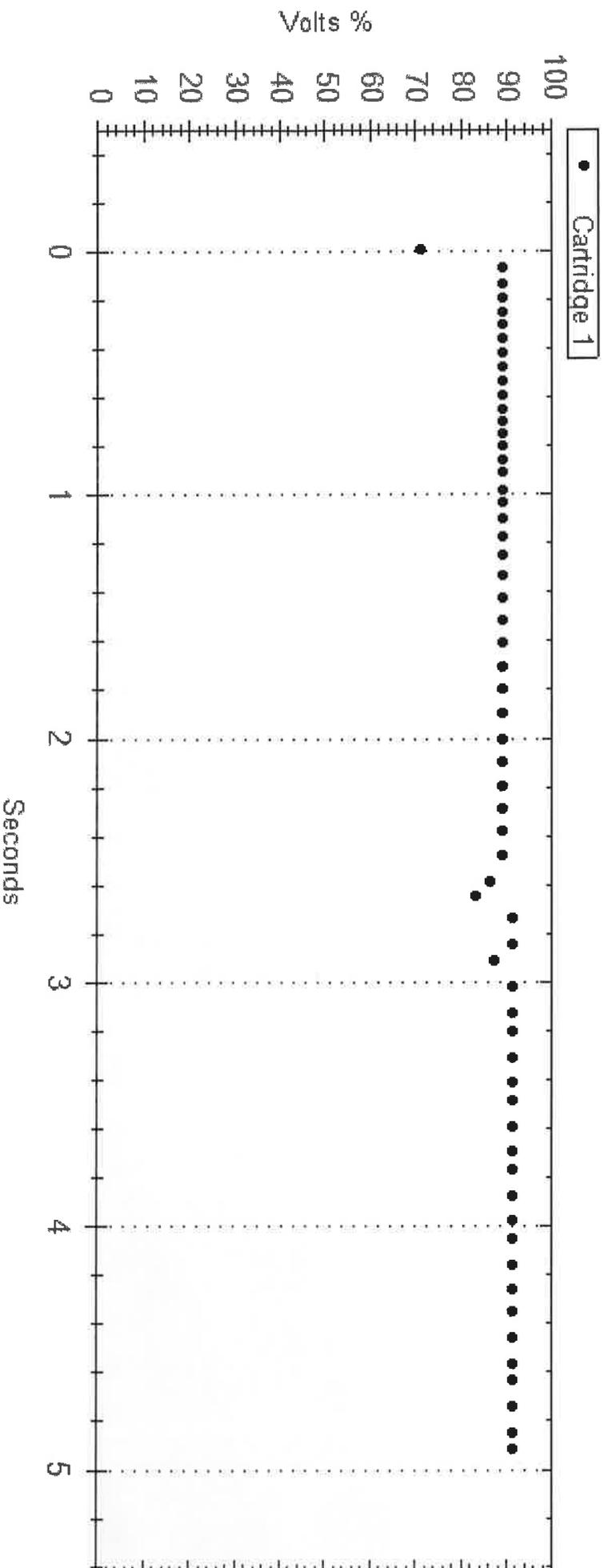
Serial #: X29000A59
Date Time: 13 Dec 2012 15:58:22



*Table indicates the charge in Microcoulombs as determined by electronic circuitry inside the Electronic Control Device.
The data does not reflect actual charge delivered into target.

Bay 1 Arc Potential*

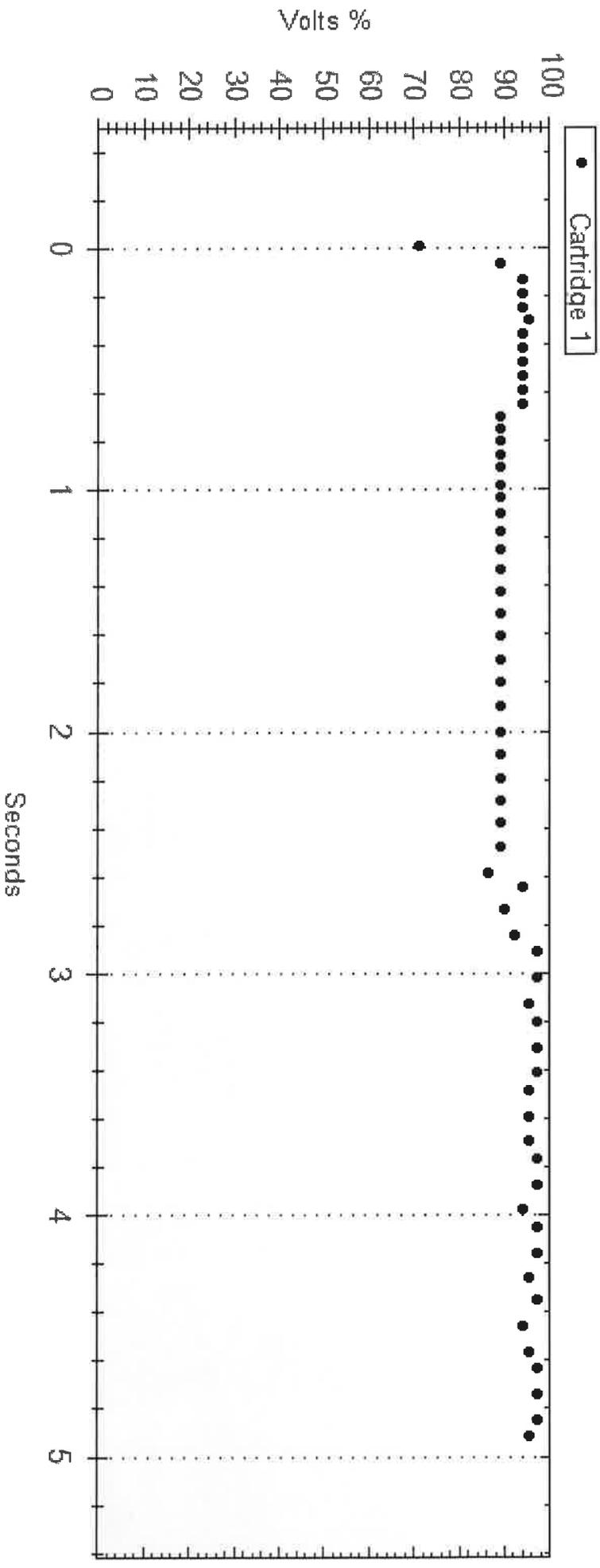
Serial #: X29000A59
Date Time: 13 Dec 2012 15:58:22



*Table indicates percentage of the total maximum output voltage of the Arc capacitor(s) measured across the capacitor(s) inside the Electronic Control Device. Table does not reflect actual voltage delivered into target.

Bay 1 Stimulation Potential*

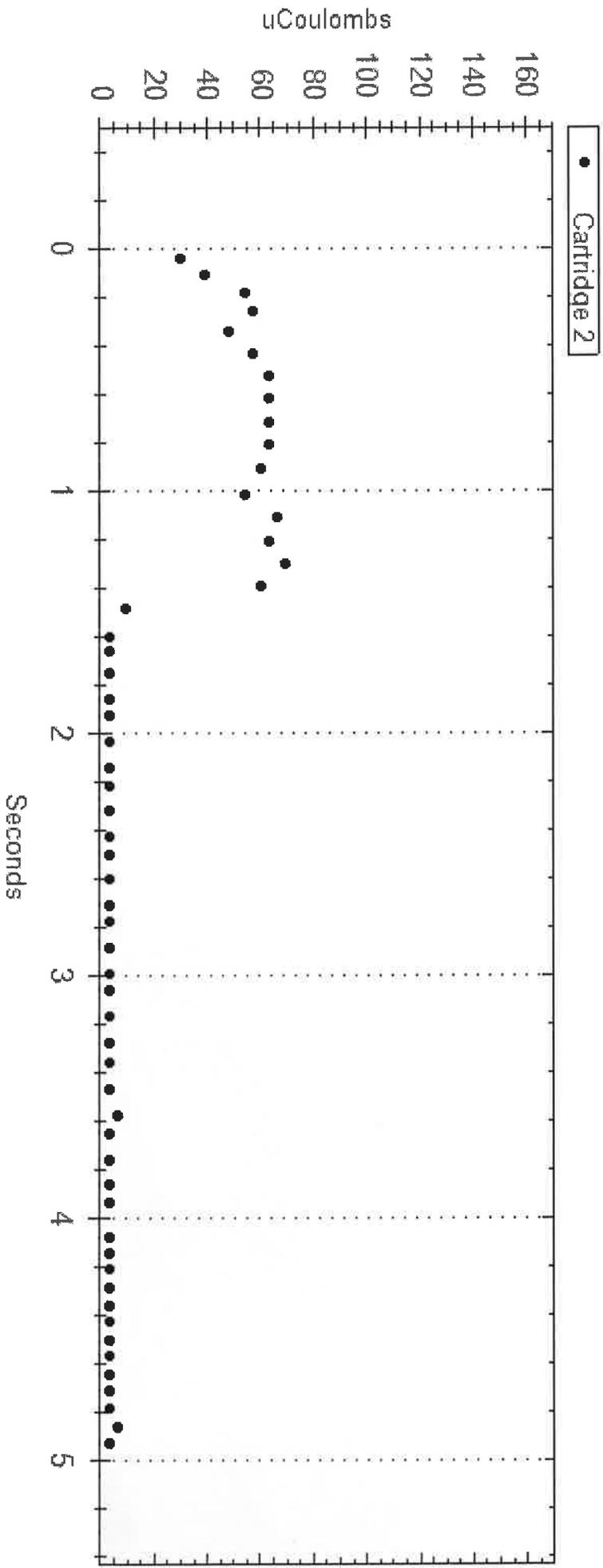
Serial #: X29000A59
Date Time: 13 Dec 2012 15:58:22



*Table indicates percentage of the total maximum output voltage of the Stimulation capacitor(s) measured across the capacitor(s) inside the Electronic Control Device. Table does not reflect actual voltage delivered into target

Bay 2 Charge*

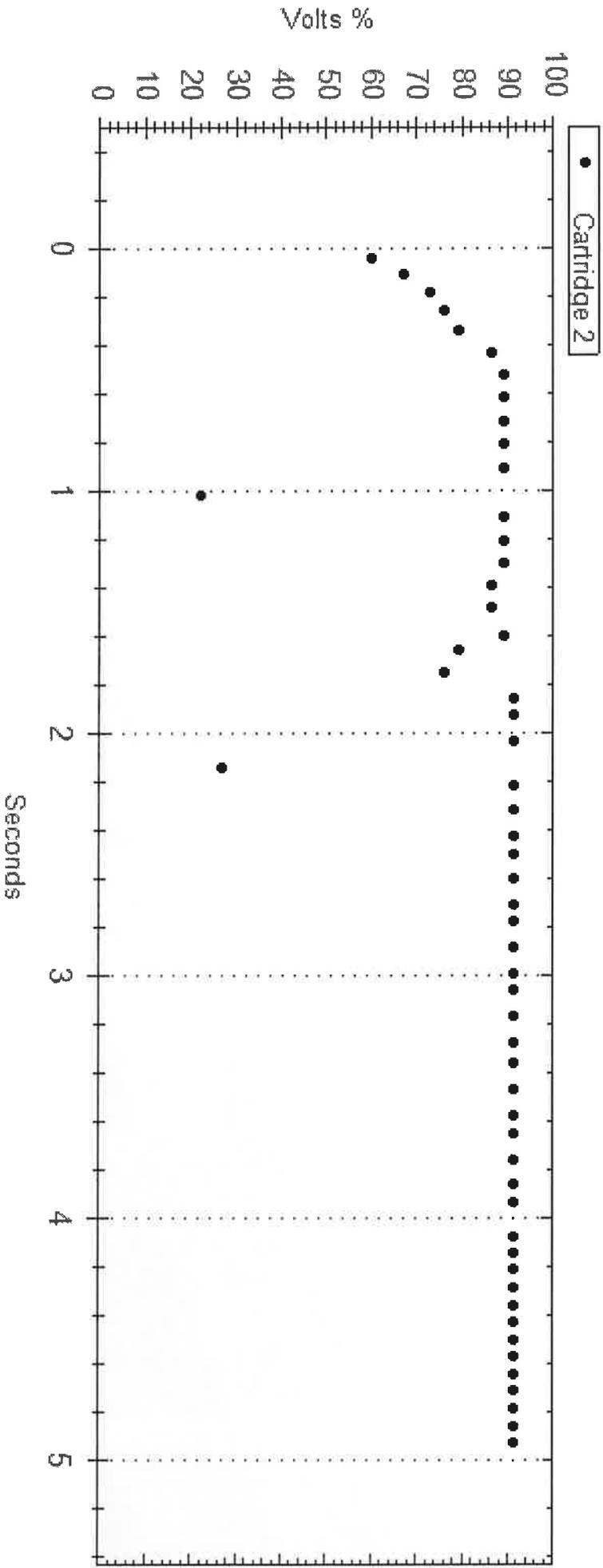
Serial #: X29000A59
Date Time: 13 Dec 2012 15:58:23



*Table indicates the charge in Microcoulombs as determined by electronic circuitry inside the Electronic Control Device. The data does not reflect actual charge delivered into target.

Bay 2 Arc Potential*

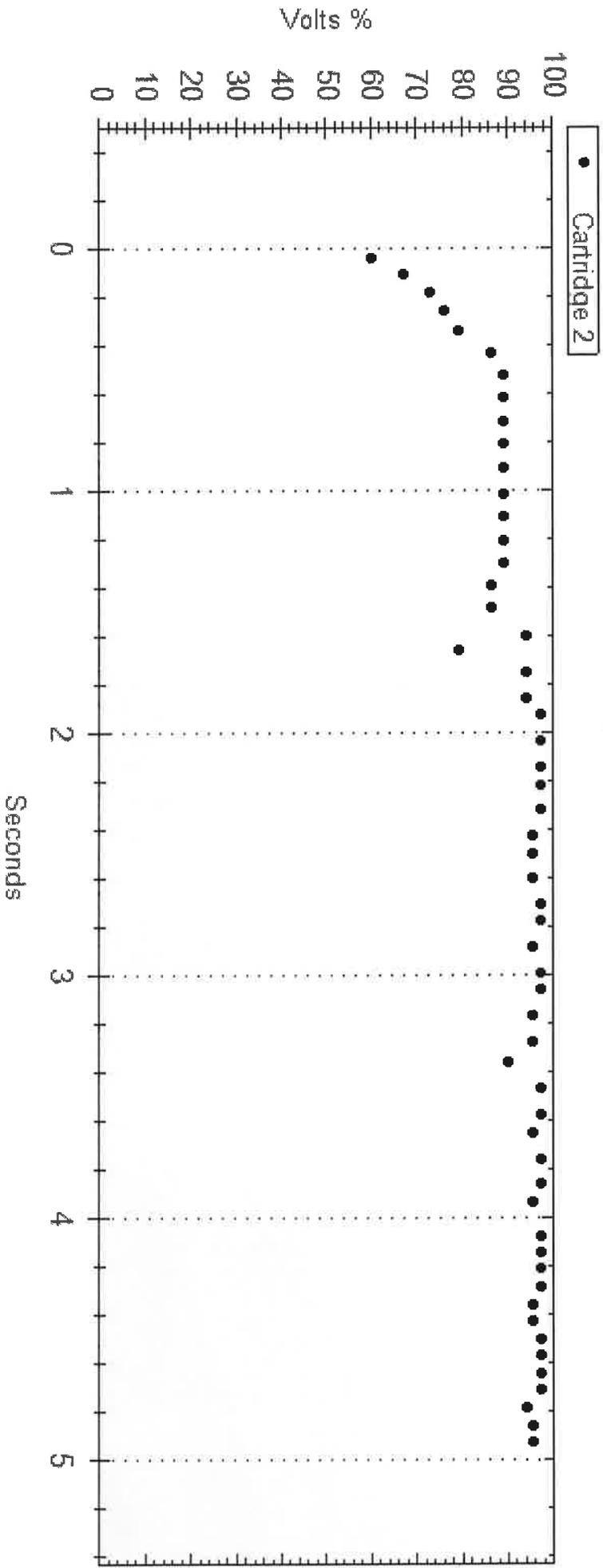
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Bay 2 Stimulation Potential*

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RESPONSE TO RESISTANCE FORM

CASE # 12WS06111

DATE OF INCIDENT 12 / 13 / 12

INCIDENT LOCATION 74 West Canal St

TIME OF INCIDENT 1058

- ! SUPERVISOR IS TO COMPLETE THIS FORM IN DETAIL
- ! COPY OF COMPLETED INCIDENT REPORT IS TO BE ATTACHED
- ! ORIGINAL (W/ATTACHMENTS) WILL BE FORWARDED TO THE CHIEF'S OFFICE, VIA CHAIN OF COMMAND

OFFICER / EMPLOYEE INFORMATION (FORM COMPILED FOR EACH OFFICER USING FORCE)	
NAME	<u>CRAM, Michael</u> ID# <u>M919</u>
<input checked="" type="checkbox"/> YES	NO MEDICAL TREATMENT REQUIRED..... INJURY/WORK COMP. PAPERWORK COMPLETED
*DESCRIBE INJURY	<u>Sprained Right Thumb - Human Bite</u>
TRANSPORTED	ADMITTED TO HOSPITAL <input checked="" type="checkbox"/> TREATED-RELEASED EMS OTHER
MEDICAL FACILITY/TREATING PHYSICIAN	<u>FAHC / Brochu, Kevin PA</u>
<input checked="" type="checkbox"/> PHOTOGRAPHS TAKEN	<u>yes</u>
<input checked="" type="checkbox"/> DUTY STATUS	<u>Returned to duty</u>

SUBJECT / SUSPECT INFORMATION	
NAME	<u>James Raymond</u>
DOB	<u>2-20-80</u> RACE <u>W</u> SEX <u>M</u>
CRIMINAL CHARGE(S)	<u>Agg assault on Police officer / Resisting arrest / 2x Possession of Narcotic</u>
<input checked="" type="checkbox"/> NO INJURY	<input type="checkbox"/> COMPLAINT OF INJURY <input type="checkbox"/> VISIBLE INJURY <input type="checkbox"/> MEDICAL ATTENTION <input type="checkbox"/> REFUSED
*DESCRIBE INJURY	
TRANSPORTED	ADMITTED TO HOSPITAL TREATED/RELEASED <input checked="" type="checkbox"/> EMS ^{SMR} OTHER
<input type="checkbox"/> PHOTOGRAPHS TAKEN	<u>no</u>

DID ANYONE WITNESS THE RESPONSE TO RESISTANCE?	<input checked="" type="checkbox"/> YES NO
STATEMENT (S) TAKEN	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (INDICATE ON WITNESS LINE FOR EACH TAKEN)
IDENTIFY NAME, ADDRESS, PHONE	
WITNESS #1	<u>Officer Machavern</u>
WITNESS #2	<u>Sgt Davis</u>
WITNESS #3	

NARRATIVE (ARTICULATE SERIOUSNESS OF OFFENSE SUSPECTED AT TIME FORCE WAS USED/ PHYSICAL THREAT TO OFFICER OR OTHERS & SUBJECT'S ACTIVE RESISTANCE OR ATTEMPT TO FLEE)

See 12WS00611

RESISTANCE		RESPONSE	
1	VERBAL	①	PRESENCE
2	PASSIVE PHYSICAL	②	COMMUNICATION
3	ACTIVE PHYSICAL	③	PHYSICAL CONTROL
4	AGGRESSIVE PHYSICAL	④	INTERMEDIATE WEAPONS <i>Taser</i>
⑤	AGGRAVATED PHYSICAL	5	INCAPACITATION
		6	DEADLY FORCE

SUSPECT FACTORS:		SUSPECT WEAPONS:	
SEX <i>M</i>	DRUG <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> HANDS	<input type="checkbox"/> FIREARM
HEIGHT <i>6'00"</i>	ALCOHOL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> FEET	<input type="checkbox"/> VEHICLE
WEIGHT <i>155</i>	UNKNOWN DRUG/ALC. <input type="checkbox"/>	<input type="checkbox"/> IMPACT	<input type="checkbox"/> CHEMICAL
AGE <i>32</i>		<input type="checkbox"/> EDGED	<input checked="" type="checkbox"/> Other <i>mouth</i>

OFFICER RESPONSES (CHECK ALL THAT APPLY)

<input checked="" type="checkbox"/> COMMAND PRESENCE	<input checked="" type="checkbox"/> VERBAL COMMANDS	<input type="checkbox"/> SOFT EMPTY HAND CONTROL	
<u>RESTRAINT DEVICES</u>	<u>ESCORTS</u>	<u>TAKE DOWNS</u>	<u>STRIKES:</u>
HANDCUFFS <input checked="" type="checkbox"/> CHECK-FIT <input checked="" type="checkbox"/> DOUBLE-LOCK LEG IRONS HOBBLE	FIELD BENT WRIST <input type="checkbox"/> PRESSURE POINT FINGER LOCK <input checked="" type="checkbox"/> SHOULDER LOCK HAMMER LOCK	<input checked="" type="checkbox"/> ARM BAR BENT WRIST FINGER LOCK SHOULDER LOCK HAMMER LOCK CALF STRIKE PULL DOWN	PUNCH PALM HEEL HAMMER FIST FORE ARM <input checked="" type="checkbox"/> ELBOW <i>X1 To rear of head</i> KNEE STRIKE LEG KICK

<u>BATON</u>	<u>CHEMICAL (OC OR OTHER)</u> (CIRCLE APPROPRIATE DEVICE)	<u>BEAN BAG OR COMPATIBLE</u>
FORE HAND STRIKE REVERSE STRIKE CLOSED BATON STRIKE	FULL INCAPACITATION PARTIAL INCAPACITATION NO APPARENT AFFECT	<input type="checkbox"/> FULL INCAPACITATION # ROUNDS _____ <input type="checkbox"/> PARTIAL INCAPACITATION <input type="checkbox"/> NO AFFECT DISTANCE _____ FEET

<u>M26 / X26 TASER</u> (CIRCLE APPROPRIATE DEVICE)	<u>FIREARM DISCHARGED OR POINTED</u>
<input checked="" type="checkbox"/> DEPLOYED <input checked="" type="checkbox"/> DRIVE STUN DEPLOYMENT DISTANCE <i>1-3 feet</i> FT NUMBER OF CYCLES _____ <input checked="" type="checkbox"/> EFFECTIVE <i>2nd</i> <input checked="" type="checkbox"/> NON-EFFECTIVE <i>1st</i> <input type="checkbox"/> M26 / X26 SERIAL # <i>Taser # 5</i> <input type="checkbox"/> CARTRIDGES(S) SERIAL #(S) <i>1st C6200A24R</i> <i>2nd C6200A4XR</i>	<input type="checkbox"/> PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> LONG GUN POINTED ONLY _____ COMPLIANCE <input type="checkbox"/> YES <input type="checkbox"/> NO NUMBER OF SHOTS _____ NUMBER OF HITS TO TARGET _____ SHOTS ACCOUNTED FOR _____ SHOTS UNACCOUNTED FOR _____ WEAPON SERIAL # _____

CONT'D

INTERNAL AFFAIRS

COMMENTS

CHIEF OF POLICE:



12/14/12

COMMENTS:

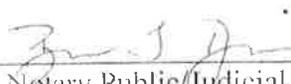
me

WINOOSKI POLICE DEPARTMENT
AFFIDAVIT
STATE OF VERMONT
Chittenden County, S.S.

NOW COMES **Sergeant Michael Cram**, affiant, being duly sworn and on oath, deposes and says he has probable cause to believe that **James P. Raymond (DOB: 07-20-1980)**, has committed the offense of **Assault on a Police Officer**, a violation of Title 13, Vermont Statutes Annotated, Section 1028 (A) (1), and has committed the offense of **Aggravated Assault**, a violation of Title 13, Vermont Statutes Annotated, Section 1024, and has committed the offense of **Resisting Arrest**, a violation of Title 13, Vermont Statutes Annotated, Section 3017, and has committed the offense of **Possession of Depressant, Stimulant, or Narcotic Drug**, a violation of Title 18, Vermont Statutes Annotated, Section 4234 (a) (1).

1. On December 13th, 2012 at approximately 1058 hours Woolen Mill employee Tammy Taylor called this agency and reported that there was a male that she believes was trespassing in the bathroom of their member's only health club and had been in the bathroom for over forty minutes. I arrived in front of the Woolen Mill and Tammy exited the building and pointed to a white male with a green and black hooded jacket with dark pants walking west on West Canal Street. I observed that this male, later identified as James P. Raymond (DOB: 07-20-1980), looked at me and then started running west through the parking lot towards the Peking Duck Restaurant. I entered my vehicle and drove to the Peking Duck Restaurant parking lot and observed the male enter the restaurant. I entered the restaurant and an employee advised that a male had just run down the stairs into the basement.
2. I traveled down the stairs and located Raymond in a bathroom stall located in the basement. I observed Raymond had several pill bottles on the top of the toilet as I encountered him. I identified myself as a police officer while in full uniform of the Winooski Police and ordered Raymond out of the stall and he refused to exit the stall and tried to slam the stall door shut. I opened the stall door, reached in, and attempted to pull Raymond out, but he resisted by pulling back and away from me. I grabbed Raymond and wrestled him to the floor of the bathroom giving him multiple orders to stop resisting and place his hands behind his back as he was under arrest. Raymond and I wrestled on the floor for approximately five minutes while I tried to move his hands to behind his back and place him in wrist restraints. Raymond continued to pull his arms under him and attempted to stand several times which I prevented.
3. While holding Raymond's right wrist with my right hand he moved his head over my right hand and with his mouth and bit my right thumb area with his teeth. I struck Raymond in the back of the head with my left elbow causing him to release my thumb from his mouth. I warned Raymond twice that I was going to taze him if he did not comply and he continued to resist. I withdrew my tazer and

Subscribed and sworn to before me on
This 13th day of December, 2012


Notary Public/Judicial Officer


Affiant

13 December 12
Date

WINOOSKI POLICE DEPARTMENT
AFFIDAVIT
STATE OF VERMONT
Chittenden County, S.S.

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discharged it towards his lower back and buttocks area. Due to the heavy clothes that he was wearing the probes did not enter his skin and the tazer did not have the desired effect. I followed up with a drive stun to the same area which incapacitated him and I was able to place him in wrist restraints.

4. Officer Machavern and Sgt Davis arrived and conducted a search of Raymond in the bathroom. All the evidence was gathered and placed on the bathroom sink counter and at that point Raymond lunged forward and placed his mouth over one of the pill bottles in an attempt to destroy by ingesting the pills in the bottle. The bottle was removed from his mouth and he was unable to get any of the pills as I had placed paper towels in the tops to keep the contents within them while being transported.
5. Raymond was moved outside and a thorough search was conducted and the following items were located on his person to include the items from the toilet.
 - 17 Bupropion / 150 mg pills / Prescription only
 - 4 Clonazepam / 2 mg pills / Schedule 4 drug
 - 2 Methylphenidate Hydrochloride / 20 mg / Schedule 2 drug
 - 22 Lexpro / 20 mg / prescription only
 - 3 Dexmethylphenidate Hydrochloride / 10mg / Schedule 2 drug
 - Glass pipe with marijuana residue
 - 3 syringes with clear liquid (to be tested later)
6. Raymond was transported to the Winooski Police Department where he was checked by Saint Michaels Rescue due to being subjected to the tazer and it was determined that he did not need medical care.
7. While Raymond was biting my right thumb I felt pain and he left three marks from his teeth on my thumb. These marks were photographed by Detective

Subscribed and sworn to before me on
This 12th day of December, 2012


Affiant


Notary Public/Judicial Officer

13 Dec 12
Date

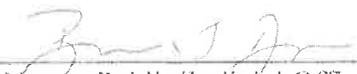
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McGivern and will be included in this case. While removing my thumb from Raymond's mouth I suffered a minor sprain of my right thumb that I will have checked by a medical professional after I bring Raymond to court.

8. I have probable cause to believe that Raymond has committed the offense of Aggravated Assault and Assault on a Police Officer as he placed his mouth on my right thumb and bit me causing bruising and pain and a possible sprain.
9. I have probable cause to believe that Raymond has committed the offense of resisting arrest as after being advised that he was under arrest continued to actively resist arrest physically by fight to not be placed in wrist restraints.
10. I have probable cause to believe that Raymond has committed the offense of Possession of Depressant, Stimulant, or Narcotic drug as he had in his possession multiple schedule 2 and prescription only drugs that he did not have a valid prescription for.

Subscribed and sworn to before me on
This 13th day of Dec 2012, 2012



Notary Public/Judicial Officer



Affiant
13 Dec 12

Date