ARKANSAS STATE POLICE

Use of Force Report Form

ASP 22

REV 04/02/2018

Name: Derek A. Nietert (First/MI/Last Name) Rank: Sergeant Badge#: 209

Division: Highway Patrol Troop/Co./Section: H

Years of Service: 8 Age: 33 Race: White Sex: M Height: 5'7" Weight: 178

CID Case File Number Troop Incident Number A-06/20-0694B ☐ N/A

Incident Type (Check ALL that apply)
- ☑ Use of Force by Officer
- ☐ Vehicle Use of Force
- ☐ Tire Deflation Device Deploy
- ☐ Accidental Firearm Discharge
- ☐ Use of Force Against Officer (No Force Used by Officer)
- ☐ Canine

Intial Use of Force	Time	Date	Location - Address, City, State, County, Zip
	11:51PM	5/31/2020	MLK Bridge, Little Rock, AR, 72201

Location	Lighting	Artificial Light	Weather	Reason For Initial Encounter	Force Was Used While
Outdoors	Dark	Poor	Clear	Crowd Control	Other

☐ Video ☐ Audio ☐ Photographs

Suspect: ☐ Juvenile (Don't show name) ☐ N/A

Name (First/MI/Last)	Age	Sex	Race	Height	Weight	DOB
Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown

Suspect Profile

Prior History of Mental Illness ☐ Yes ☐ No ☑ Unknown

History of Violence ☐ Yes ☐ No ☑ Unknown

History of Assault Against LE Officers ☐ Yes ☐ No ☑ Unknown

Other:

Suspect Had Suicidal Inclination when Confronted ☐ Yes ☐ No ☑ Unknown

Condition of Suspect (Check ALL that apply)

☐ Prior Injuries ☑ Angry/Emotional ☐ Alcohol Intoxication ☐ Drug Intoxication ☐ Welfare Case ☐ Suicidal ☐ Other

Form Of Resistance By Suspect (Check all that Apply)

- ☑ Refused to Obey/Passive
- ☑ Refused to Obey/Physically
- ☐ Fled/Attempted
- ☑ Verbal Threat
- ☑ Aggressive Movement/Action/Weapon
- ☑ Other: Unlawful Assembley

Suspect Armed with ☐ N/A

	Possessed	Threatened Use	Used as a Weapon		Possessed	Threatened Use	Used as a Weapon
Hands/Feet (Wrestled, Grasped, or Pushed)		☐	☐	OC Aerosol	☐	☐	☐
Hands/Feet (Struck Blow)		☐	☐	Edged Weapon	☐	☐	☐
Knee/Elbow/Body (Pushed)		☐	☐	Handgun	☐	☐	☐
Teeth		☐	☐	Officer's Firearm	☐	☐	☐
Motor Vehicle		☐	☐	Shotgun	☐	☐	☐
Club/Blunt Object	☐	☐	☐	Rifle	☐	☐	☐
Brass Knuckles	☐	☐	☐	Automatic Weapon	☐	☐	☐
Shocking Devise	☐	☐	☐	Explosive	☐	☐	☐
Chemicals	☐	☐	☐	Other	☐	☐	☐

Reason For Use of Force by Officer (Check Primary Reason Only)

- ☑ Protect Self
- ☐ Protect other Person
- ☐ Effect Arrest
- ☐ Prevent Escape
- ☐ Place in Protective Custody
- ☐ Maintain/Regain Control
- ☐ To End Pursuit

Assisted By ☐ None ☑ ASP Members ☐ Sheriff Dept ☑ Police Dept. ☐ Other

Name of Assisting Officer	Department of Assisting Officer
	North Little Rock Police Department

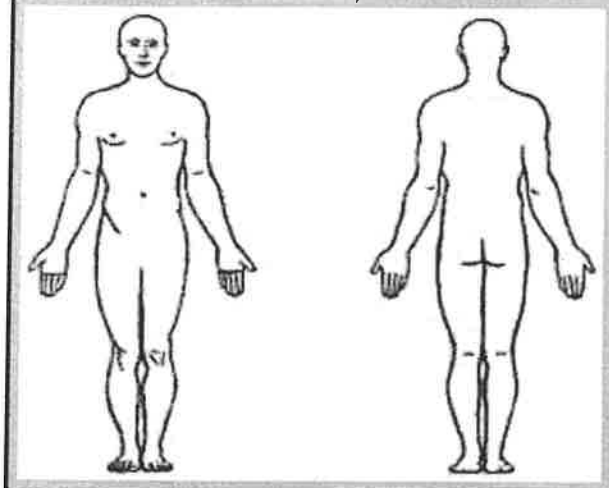
Tactics Used by Officer (Check ALL that were used)

- ☐ Wrestled, Grasped or Pushed
- ☐ Hands/Feet (struck Blow)
- ☐ Knee/Elbow/Body (Pushed)
- ☐ Knee/Elbow/Body (Struck Blow)
- ☐ Blocking Movement
- ☐ Control Hold
- ☐ Pain Compliance Hold
- ☐ Carotid Restraint
- ☑ Tear Gas
- ☐ OC Aerosol
- ☐ Diversion Devise
- ☐ Flashlight
- ☐ Baton
- ☐ Canine
- ☐ Motor Vehicle
- ☐ Tire Deflation Device Deployed
- ☐ Duty Handgun Fired
- ☐ Off Duty Handgun Fired
- ☐ CEW
- ☐ Backup Weapon Fired
- ☐ Shotgun Fired
- ☐ Rifle Fired
- ☐ Automatic Weapon Fired
- ☑ Other: LL OC munitions

If Body Armor Worn	If Worn - Did Body Armor Prevent or Reduce Injury	Duty Status	Drug/Alcohol Screen Completed on Involved Trooper
☑ Yes ☐ No	☑ Yes ☐ No	☑ Yes ☐ No	☐ Yes ☑ N/A Date Time Location

Placement of Probes upon Deployment

(Place "X's" where probes struck the subject and "O" where the subject was drive stunned)



Officers Deploying CEW ☐ Single Officer ☐ Multiple Officers

CEW Deployment Distance

CEW Deployment Success ☐ Successful ☐ Failed

CEW Total # Cycles/Charges

CEW Deployment Type

Serial Numbers CEW Cartridge(s)

Probes Penetrate Skin ☐ Yes ☐ No

Probes Removed on Scene ☐ Yes ☐ No

Probes Removed by: ☐ Officer ☐ EMT ☐ Nurse ☐ Physician ☐ Suspect

Suspect Charged ☐ Yes ☑ No Charges:

Suspect Incarcerated ☐ Yes ☑ No If Incarcerated, Name of Facility

Suspect Injured ☐ Yes ☑ No Injury Type **Suspect Hospitalized** ☐ Yes ☑ No ☐ Treated and Released to:

If Hospitalized, Name of Hospital

Attending Physician

Witness/Waiver to Refusal Suspect Refused Treatment ☐ Yes ☑ No

Suspect Deceased ☐ Yes ☑ No If Yes, Date and Time of Pronouncement Date Time

Name of coroner who pronounced suspect

Officer Injured ☐ Yes ☑ No Injury Type **Officer Hospitalized** ☐ Treated and Released to:

If Hospitalized, Name of Hospital ☐ Yes ☐ No

Attending Physician

Prosecuting Attorney Notified ☐ Yes ☐ No ☑ NA Prosecuting Attorney's Name

Sgt Derek A. Nietert #209 — Derek A. Nietert #209

Signature of Reporting Officer (First/M/Last)

Badge No 209 Rank Sergeant Date 5/30/2020

Immediate Supervisors Determination ☐ CID ☐ Recommend Additional Investigation ☑ No Additional Investigation

Comments:

Bobby G. Brown 264

Signature of Supervisor (First/M/Last)

Badge No 264 Rank LT Date 6-17-20

Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Bobby G. Brown 269

Signature of Commander (First/M/Last)

Badge No 269 Rank LT Date 6-17-20

Division Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Signature of Commander (First/M/Last)

Badge No 200 Rank MAJOR Date 06/19/2020

Prosecuting Attorney's Recommendation ☐ Clear ☐ Pending ☐ Charges Filed ☐ NA Name

Incident Report Form
Arkansas Uniform

5.1.0

Incident Report Number
A-06/20-0694B

SUMMARY

Incident Type	Incident Date	Incident Time
Little Rock Protest	5/31/2020	11:51 PM
Call Location	**Call Date**	**Call Time**
MLK Bridge	5/31/2020	11:51 PM
Incident County	**Incident Address**	
PULASKI	MLH Bridge	

Incident City	Incident State	Incident Zip Code
LITTLE ROCK	AR	72201

Number of Subjects	Number of Vehicles
0	0

NARRATIVE

On Sunday, May 31st, at 10:41 PM ASP ERT Squads 3,4, and 5 along with North Little Rock ERT and Little Rock ERT and the SWAT Bear deployed from the staging area to the Capitol in reference to protesters breaking in to the 501 building and attempting to set fire to it. We were met by approximately 300 protesters at the north end of the MLK Bridge. The order to disperse was given over the LRAD system multiple times over the period of approximately 10 minutes. Protesters began to throw water bottles, rocks and pieces of brick at our team.
A few minutes later, the order was given a second time to disperse. At which point the order was given by Sgt. Stewart to deploy gas and other less lethal means to disperse the crowd. I deployed handheld CS canisters into the crowd. Protesters continued to disobey and began chanting and continued to throw objects at and into the team.

Teams 3,4 and 5 began to push the protesters north on Woodlane toward Capital Avenue. At this time several gunshots rang out in the crowd, the ASP SWAT Bear took the lead and ERT members took cover behind the Bear. The crowd re-grouped and began approaching the ERT team again still throwing bottles and rocks at and into the ERT Team. The order was given to march forward and the crowd continued to throw rocks and water bottles at the team. C S. Gas along with less lethal munitions were deployed. The dispersal order was given continuously as the ERT Team pushed the crowd north on Woodlane Street. We continued to push the protesters to the corner of Capitol Ave / Woodlane where we encountered several protesters kneeling in the middle of the intersection. The dispersal order was given again and protesters who were standing behind those kneeling began throwing items at and into the team again. Sgt. Stewart gave the command to deploy gas and less lethal munitions again to clear the intersection and protect the ERT Team members and the capital building. I again deployed CS Gas and less lethal OC munitions and the crowd began to disperse.

OFFICER

Rank	Officer Last Name	Officer First Name	Officer MI	Officer Suffix
SGT	Nietert	Derek	N/A	N/A

Officer Signature	Officer Department
Sgt Derek Nietert	STATE POLICE TROOP H
	Officer Badge Number
	209

Rank	Supervisor Last Name	Supervisor First Name	Supervisor MI	Officer Suffix
Lieutenant	Brown	Bobby	N/A	N/A

Supervisor Signature	Supervisor Department
	STATE POLICE TROOP H
	Supervisor Badge Number
	269

ARKANSAS STATE POLICE

Use of Force Report Form

ASP 22

REV 04/02/2018

Name: Philip R. Felton (First/MI/Last Name) Rank: Corporal Badge#: 134

Division: Highway Patrol Troop/Co./Section: A

Years of Service: 8 Age: 39 Race: White Sex: M Height: 5'7 Weight: 185

CID Case File Number Troop Incident Number A-06/20-0694C ☐ N/A

Incident Type (Check ALL that apply)	☑ Use of Force by Officer ☐ Vehicle Use of Force ☐ Tire Deflation Device Deploy ☐ Accidental Firearm Discharge ☐ Use of Force Against Officer (No Force Used by Officer) ☐ Canine

Intial Use of Force	Time	Date	Location - Address, City, State, County, Zip
	11:51PM	5/31/2020	Capitol Avenue at Woodlane St. Little Rock, AR, 72201

Location	Lighting	Artificial Light	Weather	Reason For Initial Encounter	Force Was Used While
Outdoors	Dark	Poor	Clear	Crowd Control	Other

☐ Video ☐ Audio ☐ Photographs

Suspect: ☐ Juvenile (Don't show name) ☐ N/A

Name (First/MI/Last)	Age	Sex	Race	Height	Weight	DOB
Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown

Suspect Profile

Prior History of Mental Illness ☐ Yes ☐ No ☑ Unknown

History of Violence ☐ Yes ☐ No ☑ Unknown

History of Assault Against LE Officers ☐ Yes ☐ No ☑ Unknown

Other:

Suspect Had Suicidal Inclination when Confronted ☐ Yes ☐ No ☑ Unknown

Condition of Suspect (Check ALL that apply)

☐ Prior Injuries ☐ Angry/Emotional ☐ Alcohol Intoxication ☐ Drug Intoxication ☐ Welfare Case ☐ Suicidal ☐ Other

Form Of Resistance By Suspect (Check all that Apply)

☑ Refused to Obey/Passive ☑ Verbal Threat

☑ Refused to Obey/Physically ☑ Aggressive Movement/Action/Weapon

☐ Fled/Attempted ☑ Other: Unlawful Assembley

Suspect Armed with ☐ N/A

	Possessed	Threatened Use	Used as a Weapon		Possessed	Threatened Use	Used as a Weapon
Hands/Feet (Wrestled, Grasped, or Pushed)		☐	☐	OC Aerosol	☐	☐	☐
Hands/Feet (Struck Blow)		☐	☐	Edged Weapon	☐	☐	☐
Knee/Elbow/Body (Pushed)		☐	☐	Handgun	☐	☐	☐
Teeth		☐	☐	Officer's Firearm	☐	☐	☐
Motor Vehicle		☐	☐	Shotgun	☐	☐	☐
Club/Blunt Object	☐	☐	☐	Rifle	☐	☐	☐
Brass Knuckles	☐	☐	☐	Automatic Weapon	☐	☐	☐
Shocking Devise	☐	☐	☐	Explosive	☐	☐	☐
Chemicals	☐	☐	☐	Other	☐	☐	☐

Reason For Use of Force by Officer (Check Primary Reason Only)

☑ Protect Self ☐ Effect Arrest ☐ Place In Protective Custody ☐ To End Pursuit

☐ Protect other Person ☐ Prevent Escape ☐ Maintain/Regain Control

Assisted By ☐ None ☑ ASP Members ☐ Sheriff Dept ☑ Police Dept. ☐ Other

Name of Assisting Officer	Department of Assisting Officer
	North Little Rock Police Department
	Little Rock Police Department

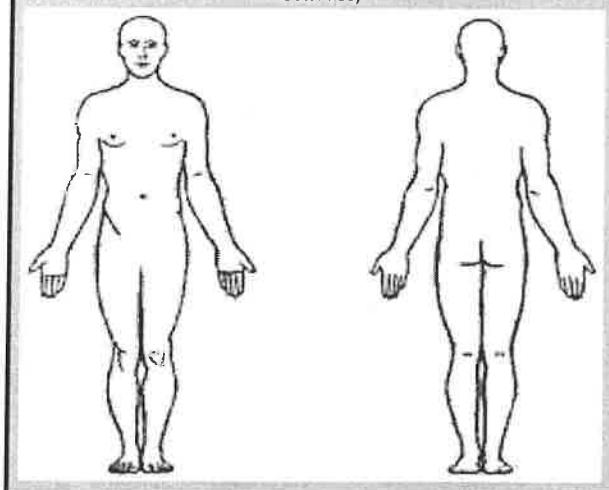
Tactics Used by Officer (Check ALL that were used)

☐ Wrestled, Grasped or Pushed	☐ Pain Compliance Hold	☐ Baton	☐ CEW
☐ Hands/Feet (struck Blow)	☐ Carotid Restraint	☐ Canine	☐ Backup Weapon Fired
☐ Knee/Elbow/Body (Pushed)	☑ Tear Gas	☐ Motor Vehicle	☐ Shotgun Fired
☐ Knee/Elbow/Body (Struck Blow)	☐ OC Aerosol	☐ Tire Deflation Device Deployed	☐ Rifle Fired
☐ Blocking Movement	☐ Diversion Devise	☐ Duty Handgun Fired	☐ Automatic Weapon Fired
☐ Control Hold	☐ Flashlight	☐ Off Duty Handgun Fired	☑ Other: PepperBall

ff Body Armor Worn	If Worn - Did Body Armor Prevent or Reduce Injury	Duty Status	Drug/Alcohol Screen Completed on Involved Trooper
☑ Yes ☐ No	☑ Yes ☐ No	☑ Yes ☐ No	☐ Yes ☑ N/A Date Time Location

Placement of Probes upon Deployment

(Place "X's" where probes struck the subject and "O" where the subject was drive stunned)



Officers Deploying CEW ☐ Single Officer ☐ Multiple Officers

CEW Deployment Distance

CEW Deployment Success ☐ Successful ☐ Failed

CEW Total # Cycles/Charges

CEW Deployment Type

Serial Numbers CEW Cartridge(s)

Probes Penetrate Skin ☐ Yes ☐ No

Probes Removed on Scene ☐ Yes ☐ No

Probes Removed by: ☐ Officer ☐ EMT ☐ Nurse ☐ Physician ☐ Suspect

Suspect Charged ☐ Yes ☑ No Charges:

Suspect Incarcerated ☐ Yes ☑ No If Incarcerated, Name of Facility

Suspect Injured ☐ Yes ☑ No Injury Type **Suspect Hospitalized** ☐ Yes ☑ No ☐ Treated and Released to:

If Hospitalized, Name of Hospital

Attending Physician

Witness/Waiver to Refusal Suspect Refused Treatment ☐ Yes ☑ No

Suspect Deceased ☐ Yes ☑ No If Yes, Date and Time of Pronouncement Date Time

Name of coroner who pronounced suspect

Officer Injured ☐ Yes ☑ No Injury Type **Officer Hospitalized** ☐ Yes ☐ No ☐ Treated and Released to:

If Hospitalized, Name of Hospital

Attending Physician

Prosecuting Attorney Notified ☐ Yes ☐ No ☑ NA Prosecuting Attorney's Name

#134 Ryan Felton — Signature of Reporting Officer (First/M/Last) — Badge No 134 — Rank Corporal — Date 6/12/2020

Immediate Supervisors Determination ☐ CID ☐ Recommend Additional Investigation ☑ No Additional Investigation

Comments:

Bobby G. Brown 269 — Signature of Supervisor (First/M/Last) — Badge No 269 — Rank LT — Date 6-17-20

Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Bobby G. Brown 269 — Signature of Commander (First/M/Last) — Badge No 269 — Rank LT — Date 6-17-20

Division Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Signature of Commander (First/M/Last) — Badge No 260 — Rank MAJOR — Date 06/19/2020

Prosecuting Attorney's Recommendation ☐ Clear ☐ Pending ☐ Charges Filed ☐ NA Name

Incident Report Form
Arkansas Uniform

5.1.0

Incident Report Number
A-06/20-0694C

SUMMARY

Incident Type	Incident Date	Incident Time
Little Rock Protest	5/31/2020	11:51 PM
Call Location	**Call Date**	**Call Time**
Capitol Ave at Woodlane Street	5/31/2020	11:51 PM

Incident County	Incident Address
PULASKI	Capitol Ave at Woodlane Street

Incident City	Incident State	Incident Zip Code
LITTLE ROCK	AR	72201

Number of Subjects	Number of Vehicles
0	0

NARRATIVE

On Sunday May 31,2020, I was assigned to the Arkansas State Police Emergency Response Team. We responded to a civil unrest in the area of the Arkansas State Capital. Upon arrival a large crowd was blocking Woodlane Street. The subjects were given several commands to clear to roadway which were ignored.

The subjects were throwing objects and shooting fireworks at officers. Platoon Leader Ronnie Stewart gave grenadiers the command to deploy chemical agents to disperse the crowd. I was carrying handheld CS canisters which I deployed in front of the crowd. The chemical agents caused the crowd to move north toward the capital before grouping up again and blocking the roadway. The subjects were given commands again to clear the roadway and leave the area. The commands were ignored and Platoon Leader Ronnie Stewart gave grenadiers the command again to deploy chemical agents.

Once the crowd dispersed we returned to the Capitol. During this incident large fireworks were being shot towards ERT members and and other objects were being thrown at us.

OFFICER

Rank	Officer Last Name	Officer First Name	Officer MI	Officer Suffix
CPL	Felton	Ryan	N/A	N/A

Officer Signature	Officer Department
#134	STATE POLICE TROOP A
	Officer Badge Number
	134

Rank	Supervisor Last Name	Supervisor First Name	Supervisor MI	Officer Suffix
Lieutenant	Brown	Bobby	G	N/A

Supervisor Signature	Supervisor Department
269	STATE POLICE TROOP A
	Supervisor Badge Number
	269

ARKANSAS STATE POLICE

Use of Force Report Form

ASP **22**

REV 04/02/2018

Name: Gabriel Monroe (First/MI/Last Name) Rank: TFC Badge#: 374

Division: 7 Troop/Co./Section: A

Years of Service: 7 Age: 30 Race: White Sex: M Height: 6' Weight: 215

CID Case File Number Troop Incident Number A-06/20-0694D ☐ N/A

Incident Type (Check ALL that apply)
- ☑ Use of Force by Officer
- ☐ Vehicle Use of Force
- ☐ Tire Deflation Device Deploy
- ☐ Accidental Firearm Discharge
- ☐ Use of Force Against Officer (No Force Used by Officer)
- ☐ Canine

Intial Use of Force	Time	Date	Location - Address, City, State, County, Zip
	11:51PM	5/31/2020	7th Street at Woodlane , Little Rock, AR, 72201

Location	Lighting	Artificial Light	Weather	Reason For Initial Encounter	Force Was Used While
Outdoors	Dark	Poor	Clear	Crowd Control	Other

☐ Video ☐ Audio ☐ Photographs

Suspect: ☐ Juvenile (Don't show name) ☐ N/A

Name (First/MI/Last)	Age	Sex	Race	Height	Weight	DOB
Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown

Suspect Profile

Prior History of Mental Illness ☐ Yes ☐ No ☑ Unknown

History of Violence ☐ Yes ☐ No ☑ Unknown

History of Assault Against LE Officers ☐ Yes ☐ No ☑ Unknown

Other:

Suspect Had Suicidal Inclination when Confronted ☐ Yes ☐ No ☑ Unknown

Condition of Suspect (Check ALL that apply)

☐ Prior Injuries ☐ Angry/Emotional ☐ Alcohol Intoxication ☐ Drug Intoxication ☐ Welfare Case ☐ Suicidal ☐ Other

Form Of Resistance By Suspect (Check all that Apply)

- ☑ Refused to Obey/Passive
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- ☑ Verbal Threat
- ☑ Aggressive Movement/Action/Weapon
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Suspect Armed with ☐ N/A

	Possessed	Threatened Use	Used as a Weapon		Possessed	Threatened Use	Used as a Weapon
Hands/Feet (Wrestled, Grasped, or Pushed)		☐	☐	OC Aerosol	☐	☐	☐
Hands/Feet (Struck Blow)		☐	☐	Edged Weapon	☐	☐	☐
Knee/Elbow/Body (Pushed)		☐	☐	Handgun	☐	☐	☐
Teeth		☐	☐	Officer's Firearm	☐	☐	☐
Motor Vehicle		☐	☐	Shotgun	☐	☐	☐
Club/Blunt Object	☐	☐	☐	Rifle	☐	☐	☐
Brass Knuckles	☐	☐	☐	Automatic Weapon	☐	☐	☐
Shocking Devise	☐	☐	☐	Explosive	☐	☐	☐
Chemicals	☐	☐	☐	Other	☐	☐	☐

Reason For Use of Force by Officer (Check Primary Reason Only)

- ☑ Protect Self
- ☐ Protect other Person
- ☐ Effect Arrest
- ☐ Prevent Escape
- ☐ Place in Protective Custody
- ☐ Maintain/Regain Control
- ☐ To End Pursuit

Assisted By ☐ None ☑ ASP Members ☐ Sheriff Dept ☑ Police Dept. ☐ Other

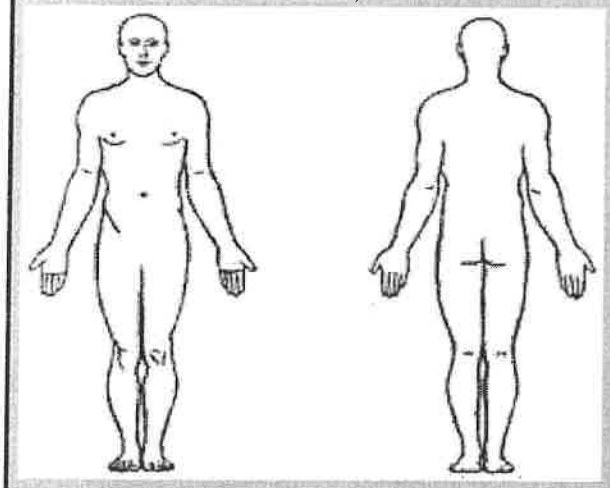
Name of Assisting Officer	Department of Assisting Officer

Tactics Used by Officer (Check ALL that were used)

- ☐ Wrestled, Grasped or Pushed
- ☐ Hands/Feet (struck Blow)
- ☐ Knee/Elbow/Body (Pushed)
- ☐ Knee/Elbow/Body (Struck Blow)
- ☐ Blocking Movement
- ☐ Control Hold
- ☐ Pain Compliance Hold
- ☐ Carotid Restraint
- ☑ Tear Gas
- ☐ OC Aerosol
- ☐ Diversion Devise
- ☐ Flashlight
- ☐ Baton
- ☐ Canine
- ☐ Motor Vehicle
- ☐ Tire Deflation Device Deployed
- ☐ Duty Handgun Fired
- ☐ Off Duty Handgun Fired
- ☐ CEW
- ☐ Backup Weapon Fired
- ☐ Shotgun Fired
- ☐ Rifle Fired
- ☐ Automatic Weapon Fired
- ☑ Other: PepperBall

ff Body Armor Worn	If Worn - Did Body Armor Prevent or Reduce Injury	Duty Status	Drug/Alcohol Screen Completed on Involved Trooper
☑ Yes ☐ No	☑ Yes ☐ No	☑ Yes ☐ No	☐ Yes ☑ N/A Date Time Location

Placement of Probes upon Deployment
(Place "X's" where probes struck the subject and "O" where the subject was drive stunned)



Officers Deploying CEW ☐ Single Officer ☐ Multiple Officers

CEW Deployment Distance

CEW Deployment Success ☐ Successful ☐ Failed

CEW Total # Cycles/Charges

CEW Deployment Type

Serial Numbers CEW Cartridge(s)

Probes Penetrate Skin ☐ Yes ☐ No

Probes Removed on Scene ☐ Yes ☐ No

Probes Removed by: ☐ Officer ☐ EMT ☐ Nurse ☐ Physician ☐ Suspect

Suspect Charged ☐ Yes ☑ No Charges:

Suspect Incarcerated ☐ Yes ☑ No If Incarcerated, Name of Facility

Suspect Injured ☐ Yes ☑ No Injury Type **Suspect Hospitalized** ☐ Yes ☑ No ☐ Treated and Released to:

If Hospitalized, Name of Hospital

Attending Physician

Witness/Waiver to Refusal Suspect Refused Treatment ☐ Yes ☑ No

Suspect Deceased ☐ Yes ☑ No If Yes, Date and Time of Pronouncement Date Time

Name of coroner who pronounced suspect

Officer Injured ☐ Yes ☑ No Injury Type **Officer Hospitalized** ☐ Yes ☐ No ☐ Treated and Released to:

If Hospitalized, Name of Hospital

Attending Physician

Prosecuting Attorney Notified ☐ Yes ☐ No ☑ NA Prosecuting Attorney's Name

TFC Gabriel J. Monroe #374 Badge No 374 Rank TFC Date 5/31/2020

Signature of Reporting Officer (First/M/Last)

Immediate Supervisors Determination ☐ CID ☐ Recommend Additional Investigation ☑ No Additional Investigation

Comments:

Bobby G. Brown 269 Badge No 269 Rank LT Date 6-17-20

Signature of Supervisor (First/M/Last)

Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

269 Badge No 269 Rank LT Date 6-17-20

Signature of Commander (First/M/Last)

Division Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Badge No 250 Rank MAJOR Date 06/19/2020

Signature of Commander (First/M/Last)

Prosecuting Attorney's Recommendation ☐ Clear ☐ Pending ☐ Charges Filed ☐ NA Name

Incident Report Form
Arkansas Uniform

5.1.0

Incident Report Number
A-06/20-0694D

SUMMARY

Incident Type	Incident Date	Incident Time
Little Rock Protest	5/31/2020	11:51:00 PM
Call Location	**Call Date**	**Call Time**
7th St at Woodlane St	5/31/2020	11:51:00 PM
Incident County	**Incident Address**	
PULASKI	7th ST at Woodlane St	

Incident City	Incident State	Incident Zip Code
LITTLE ROCK	AR	72201

Number of Subjects	Number of Vehicles
0	0

NARRATIVE

On May 31st 2020, I was assigned to the ASP ERT in order to disperse an unlawful assembly near the State Capitol. The ERT Field Force formed a line on MLK Jr. Blvd near the intersection of 7th Street. The order was given for the crowds to disperse due to an unlawful assembly. The ERT Field Force moved toward the intersection and the crowd started to disperse. A smaller group of people were forming up further north on Woodlane St. The group started throwing various items at Officers. The Team Leaders ordered all grenadiers to deploy handheld and Launcher systems to disperse the crowd. I deployed the Pepperball System toward the feet of multiple groups of people where I had observed bottles and other various items being thrown from. Those crowds of people eventually dispersed and the ERT Field Force moved to the front steps of the Capitol. The crowd of people regrouped and approached the Officers again. The order was given to deploy handheld munitions and Launching Systems. I deployed the Pepperball Systems at the feet of multiple groups of people in order for them to disperse. I was not able to identify any people affected by the PAVA powder from the Pepperball System. No arrest were made of any people who threw debris at Officers.

OFFICER

Rank	Officer Last Name	Officer First Name	Officer MI	Officer Suffix
TFC	Monroe	Gabriel		

Officer Signature	Officer Department
Gabriel J Monroe 374	STATE POLICE TROOP A
	Officer Badge Number
	374

Rank	Supervisor Last Name	Supervisor First Name	Supervisor MI	Officer Suffix
LT	Brown	Bobby	N/A	N/A

Supervisor Signature	Supervisor Department
B 269	STATE POLICE TROOP A
	Supervisor Badge Number
	269

ARKANSAS STATE POLICE

Use of Force Report Form

ASP 22

REV 04/02/2018

Name: ROBERT KYLE JONES (First/MI/Last Name) Rank: CORPORAL Badge#: 503

Division: HP Troop/Co./Section: G

Years of Service: 9 Age: 35 Race: White Sex: M Height: 5'8" Weight: 190

CID Case File Number _____ Troop Incident Number A-06/20-0694E ☐ N/A

Incident Type (Check ALL that apply)
- ☑ Use of Force by Officer
- ☐ Vehicle Use of Force
- ☐ Tire Deflation Device Deploy
- ☐ Accidental Firearm Discharge
- ☐ Use of Force Against Officer (No Force Used by Officer)
- ☐ Canine

Intial Use of Force	Time	Date	Location - Address, City, State, County, Zip
	1151PM	5/31/2020	CAPITAL

Location	Lighting	Artificial Light	Weather	Reason For Initial Encounter	Force Was Used While
Outdoors	Dark	Poor	Clear	Crowd Control	Other

☐ Video ☐ Audio ☐ Photographs

Suspect: ☐ Juvenile (Don't show name) ☑ N/A

Name (First/MI/Last)	Age	Sex	Race	Height	Weight	DOB
N/A	N/A	N/A	N/A	N/A	N/A	N/A

Suspect Profile

Prior History of Mental Illness ☐ Yes ☐ No ☑ Unknown

History of Violence ☐ Yes ☐ No ☑ Unknown

History of Assault Against LE Officers ☐ Yes ☐ No ☑ Unknown

Other:

Suspect Had Suicidal Inclination when Confronted ☐ Yes ☐ No ☑ Unknown

Condition of Suspect (Check ALL that apply)

☐ Prior Injuries ☐ Angry/Emotional ☐ Alcohol Intoxication ☐ Drug Intoxication ☐ Welfare Case ☐ Suicidal ☐ Other

Form Of Resistance By Suspect (Check all that Apply)
- ☑ Refused to Obey/Passive
- ☑ Refused to Obey/Physicially
- ☐ Fled/Attempted
- ☑ Verbal Threat
- ☑ Aggressive Movement/Action/Weapon
- ☑ Other UNLAWFUL ASSEMBLEY

Suspect Armed with FIREWORKS AND OTHER UNKNOWN C ☐ N/A

	Possessed	Threatened Use	Used as a Weapon		Possessed	Threatened Use	Used as a Weapon
Hands/Feet (Wrestled, Grasped, or Pushed)		☐	☐	OC Aerosol	☐	☐	☐
Hands/Feet (Struck Blow)		☐	☐	Edged Weapon	☐	☐	☐
Knee/Elbow/Body (Pushed)		☐	☐	Handgun	☐	☐	☐
Teeth		☐	☐	Officer's Firearm	☐	☐	☐
Motor Vehicle		☐	☐	Shotgun	☐	☐	☐
Club/Blunt Object	☐	☐	☐	Rifle	☐	☐	☐
Brass Knuckles	☐	☐	☐	Automatic Weapon	☐	☐	☐
Shocking Devise	☐	☐	☐	Explosive	☐	☐	☑
Chemicals	☐	☐	☐	Other WN THROWABLE C	☐	☐	☑

Reason For Use of Force by Officer (Check Primary Reason Only)
- ☑ Protect Self
- ☑ Protect other Person
- ☐ Effect Arrest
- ☐ Prevent Escape
- ☐ Place In Protective Custody
- ☑ Maintain/Regain Control
- ☐ To End Pursuit

Assisted By ☐ None ☑ ASP Members ☐ Sheriff Dept ☐ Police Dept. ☐ Other

Name of Assisting Officer	Department of Assisting Officer

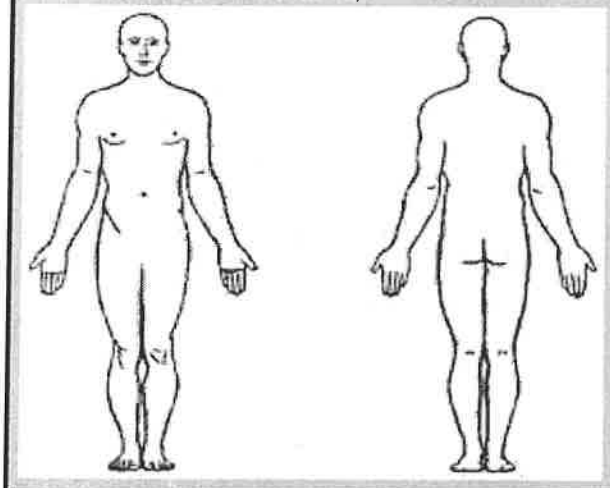
Tactics Used by Officer (Check ALL that were used)

- ☐ Wrestled, Grasped or Pushed
- ☐ Hands/Feet (struck Blow)
- ☐ Knee/Elbow/Body (Pushed)
- ☐ Knee/Elbow/Body (Struck Blow)
- ☐ Blocking Movement
- ☐ Control Hold
- ☐ Pain Compliance Hold
- ☐ Carotid Restraint
- ☑ Tear Gas
- ☐ OC Aerosol
- ☐ Diversion Devise
- ☐ Flashlight
- ☐ Baton
- ☐ Canine
- ☐ Motor Vehicle
- ☐ Tire Deflation Device Deployed
- ☐ Duty Handgun Fired
- ☐ Off Duty Handgun Fired
- ☐ CEW
- ☐ Backup Weapon Fired
- ☐ Shotgun Fired
- ☐ Rifle Fired
- ☐ Automatic Weapon Fired
- ☐ Other

If Body Armor Worn	If Worn - Did Body Armor Prevent or Reduce Injury	Duty Status	Drug/Alcohol Screen Completed on Involved Trooper
☑ Yes ☐ No	☑ Yes ☐ No	☑ Yes ☐ No	☐ Yes ☑ N/A Date Time Location

Placement of Probes upon Deployment

(Place "X's" where probes struck the subject and "O" where the subject was drive stunned)



Officers Deploying CEW ☐ Single Officer ☐ Multiple Officers

CEW Deployment Distance

CEW Deployment Success ☐ Successful ☐ Failed

CEW Total # Cycles/Charges

CEW Deployment Type

Serial Numbers CEW Cartridge(s)

Probes Penetrate Skin ☐ Yes ☐ No

Probes Removed on Scene ☐ Yes ☐ No

Probes Removed by: ☐ Officer ☐ EMT ☐ Nurse ☐ Physician ☐ Suspect

Suspect Charged ☐ Yes ☑ No Charges:

Suspect Incarcerated ☐ Yes ☑ No If Incarcerated, Name of Facility

Suspect Injured ☐ Yes ☑ No Injury Type **Suspect Hospitalized** ☐ Yes ☐ No ☐ Treated and Released to:

If Hospitalized, Name of Hospital

Attending Physician

Witness/Waiver to Refusal Suspect Refused Treatment ☐ Yes ☐ No

Suspect Deceased ☐ Yes ☑ No If Yes, Date and Time of Pronouncement Date Time

Name of coroner who pronounced suspect

Officer Injured ☐ Yes ☑ No Injury Type **Officer Hospitalized** ☐ Yes ☑ No ☐ Treated and Released to:

If Hospitalized, Name of Hospital

Attending Physician

Prosecuting Attorney Notified ☐ Yes ☐ No ☑ NA Prosecuting Attorney's Name

CPL. #503

CPL KYLE JONES #503

Signature of Reporting Officer (First/M/Last)

Badge No 503

Rank CORPORAL

Date 6/11/2020

Immediate Supervisors Determination ☐ CID ☐ Recommend Additional Investigation ☑ No Additional Investigation

Comments:

Bobby G. Brown 269

Signature of Supervisor (First/M/Last)

Badge No 269

Rank Lt

Date 6-17-20

Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

269

Signature of Commander (First/M/Last)

Badge No 269

Rank Lt

Date 6-17-20

Division Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Signature of Commander (First/M/Last)

Badge No 250

Rank MAJOR

Date 06/19/2020

Prosecuting Attorney's Recommendation ☐ Clear ☐ Pending ☐ Charges Filed ☐ NA Name

Incident Report Form
Arkansas Uniform

5.1.0

Incident Report Number
A-06/20-0694E

SUMMARY

Incident Type	Incident Date	Incident Time
USE OF FORCE	5/31/2020	11:51 PM
Call Location	**Call Date**	**Call Time**
STATE CAPITAL	5/31/2020	11:51 PM
Incident County	**Incident Address**	
PULASKI	STATE CAPITAL	

Incident City	Incident State	Incident Zip Code
LITTLE ROCK	AR	72201

Number of Subjects	Number of Vehicles
0	0

NARRATIVE

On Sunday May 31, 2020 I, Corporal Kyle Jones, was dispatched with the Arkansas State Police Emergency Response Team to the Arkansas State Capital for an unruly group of protestors. We were told that the protestors had been breaking windows and destroying property.

Once arriving at the Arkansas State Capital, our team was met with a group of protestors that started throwing large fireworks and other objects at us. The group was given loud precise commands to leave the area due to the gathering was deemed unlawful. The group did not leave but continued to throw objects towards the Arkansas State Police Emergency Response Team. At this time Platoon Leader Sergeant Ronnie Stewart gave the order to deploy chemical agents to disperse the crowd. I then deployed 40mm "CS" rounds out of my 40mm launcher in a strategic way to disperse the large crowd away from us to the north. During this time, I also threw a handheld "CS" canister to the feet of a group that was to close to deploy the "CS" with my 40mm launcher.

THERE WRE NO ARRESTS DURING THIS INCIDENT.

OFFICER

Rank	Officer Last Name	Officer First Name	Officer MI	Officer Suffix
CPL	Jones	Kyle	N/A	N/A

Officer Signature	Officer Department
CPL #503	STATE POLICE TROOP G
	Officer Badge Number
	503

Rank	Supervisor Last Name	Supervisor First Name	Supervisor MI	Officer Suffix
Lieutenant	BROWN	BOBBY	N/A	N/A

Supervisor Signature	Supervisor Department
269	STATE POLICE TROOP G
	Supervisor Badge Number
	269

ARKANSAS STATE POLICE

ASP 22

REV 04/02/2018

Use of Force Report Form

Name: Jason C. Baethke (First/MI/Last Name) Rank: Corporal Badge#: 20

Division: HIGHWAY PATROL Troop/Co./Section: I

Years of Service: 8 Age: 35 Race: White Sex: M Height: 6'2" Weight: 205

CID Case File Number ____ Troop Incident Number A-06/20-0694F ☐N/A

Incident Type (Check ALL that apply)
- ☑ Use of Force by Officer
- ☐ Vehicle Use of Force
- ☐ Tire Deflation Device Deploy
- ☐ Accidental Firearm Discharge
- ☐ Use of Force Against Officer (No Force Used by Officer)
- ☐ Canine

Intial Use of Force	Time	Date	Location - Address, City, State, County, Zip
	11:51PM	5/31/2020	CAPITAL AVENUE AT WOODLANE ST., LITTLE ROCK, AR, 72201

Location	Lighting	Artificial Light	Weather	Reason For Initial Encounter	Force Was Used While
Outdoors	Dark	Poor	Clear	Crowd Control	Other

☐ Video ☐ Audio ☐ Photographs

Suspect: ☐ Juvenile (Don't show name) ☐ N/A

Name (First/MI/Last)	Age	Sex	Race	Height	Weight	DOB
UNKNOWN		M	W			

Suspect Profile

Prior History of Mental Illness ☐ Yes ☐ No ☑ Unknown

History of Violence ☐ Yes ☐ No ☑ Unknown

History of Assault Against LE Officers ☐ Yes ☐ No ☑ Unknown

Other: ____

Suspect Had Suicidal Inclination when Confronted ☐ Yes ☐ No ☑ Unknown

Condition of Suspect (Check ALL that apply)
☐ Prior Injuries ☑ Angry/Emotional ☐ Alcohol Intoxication ☐ Drug Intoxication ☐ Welfare Case ☐ Suicidal ☐ Other

Form Of Resistance By Suspect (Check all that Apply)
- ☑ Refused to Obey/Passive
- ☐ Refused to Obey/Physicially
- ☐ Fled/Attempted
- ☐ Verbal Threat
- ☑ Aggressive Movement/Action/Weapon
- ☐ Other ____

Suspect Armed with ____ ☐ N/A

	Possessed	Threatened Use	Used as a Weapon		Possessed	Threatened Use	Used as a Weapon
Hands/Feet (Wrestled, Grasped, or Pushed)		☐	☐	OC Aerosol	☐	☐	☐
Hands/Feet (Struck Blow)		☐	☐	Edged Weapon	☐	☐	☐
Knee/Elbow/Body (Pushed)		☐	☐	Handgun	☐	☐	☐
Teeth		☐	☐	Officer's Firearm	☐	☐	☐
Motor Vehicle		☐	☐	Shotgun	☐	☐	☐
Club/Blunt Object	☐	☐	☐	Rifle	☐	☐	☐
Brass Knuckles	☐	☐	☐	Automatic Weapon	☐	☐	☐
Shocking Devise	☐	☐	☐	Explosive	☐	☐	☐
Chemicals	☐	☐	☐	Other ____	☐	☐	☐

Reason For Use of Force by Officer (Check Primary Reason Only)
- ☐ Protect Self
- ☑ Protect other Person
- ☐ Effect Arrest
- ☐ Prevent Escape
- ☐ Place in Protective Custody
- ☐ Maintain/Regain Control
- ☐ To End Pursuit

Assisted By ☑ None ☐ ASP Members ☐ Sheriff Dept ☐ Police Dept. ☐ Other ____

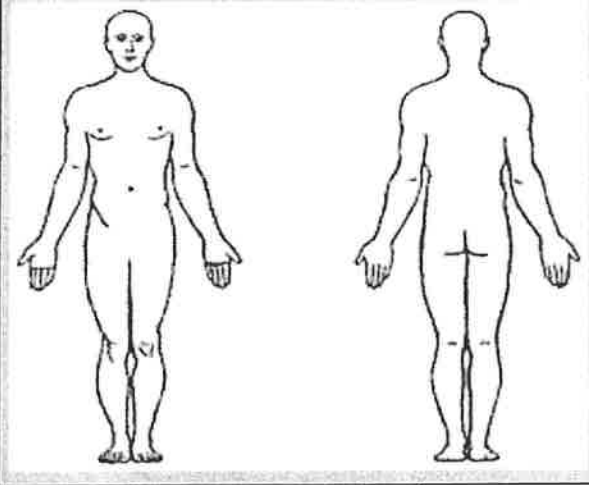
Name of Assisting Officer	Department of Assisting Officer

Tactics Used by Officer (Check ALL that were used)

- ☐ Wrestled, Grasped or Pushed
- ☐ Hands/Feet (struck Blow)
- ☐ Knee/Elbow/Body (Pushed)
- ☐ Knee/Elbow/Body (Struck Blow)
- ☐ Blocking Movement
- ☐ Control Hold
- ☐ Pain Compliance Hold
- ☐ Carotid Restraint
- ☐ Tear Gas
- ☐ OC Aerosol
- ☐ Diversion Devise
- ☐ Flashlight
- ☐ Baton
- ☐ Canine
- ☐ Motor Vehicle
- ☐ Tire Deflation Device Deployed
- ☐ Duty Handgun Fired
- ☐ Off Duty Handgun Fired
- ☐ CEW
- ☐ Backup Weapon Fired
- ☐ Shotgun Fired
- ☐ Rifle Fired
- ☐ Automatic Weapon Fired
- ☑ Other 40mm foam

Off Body Armor Worn	If Worn - Did Body Armor Prevent or Reduce Injury	Duty Status	Drug/Alcohol Screen Completed on Involved Trooper
☑ Yes ☐ No	☐ Yes ☑ No	☑ Yes ☐ No	☐ Yes ☑ N/A Date ____ Time ____ Location ____

Placement of Probes upon Deployment
(Place "X's" where probes struck the subject and "O" where the subject was drive stunned)



Officers Deploying CEW ☐ Single Officer ☐ Multiple Officers

CEW Deployment Distance

CEW Deployment Success ☐ Successful ☐ Failed

CEW Total # Cycles/Charges

CEW Deployment Type

Serial Numbers CEW Cartridge(s)

Probes Penetrate Skin ☐ Yes ☐ No

Probes Removed on Scene ☐ Yes ☐ No

Probes Removed by: ☐ Officer ☐ EMT ☐ Nurse ☐ Physician ☐ Suspect

Suspect Charged ☐ Yes ☑ No Charges:

Suspect Incarcerated ☐ Yes ☑ No If Incarcerated, Name of Facility

Suspect Injured ☐ Yes ☐ No Injury Type Unknown **Suspect Hospitalized** ☐ Yes ☐ No ☐ Treated and Released to:

If Hospitalized, Name of Hospital

Attending Physician

Witness/Waiver to Refusal Suspect Refused Treatment ☐ Yes ☐ No

Suspect Deceased ☐ Yes ☑ No If Yes, Date and Time of Pronouncement Date Time

Name of coroner who pronounced suspect

Officer Injured ☐ Yes ☑ No Injury Type **Officer Hospitalized** ☐ Treated and Released to:

If Hospitalized, Name of Hospital ☐ Yes ☑ No

Attending Physician

Prosecuting Attorney Notified ☐ Yes ☐ No ☑ NA Prosecuting Attorney's Name

Cpl. Jason Baethke #20
Cpl. Jason C. Baethke #20
Signature of Reporting Officer (First/M/Last)

Badge No 20
Rank Corporal
Date 6/17/2020

Immediate Supervisors Determination ☐ CID ☐ Recommend Additional Investigation ☑ No Additional Investigation

Comments: Cpl. Baethke used the appropriate amount of force necessary.

Sgt. Brandon M. Mayo #678
Signature of Supervisor (First/M/Last)

Badge No 678
Rank Sergeant
Date 6/17/2020

Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Jeff P. Sheeler
Signature of Commander (First/M/Last)

Badge No 457
Rank Lieutenant
Date 06/17/2020

Division Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Signature of Commander (First/M/Last)

Badge No 250
Rank MAJOR
Date 06/19/2020

Prosecuting Attorney's Recommendation ☐ Clear ☐ Pending ☐ Charges Filed ☐ NA Name

Incident Report Form
Arkansas Uniform

5.1.0

Incident Report Number
A-06/20-0694F

SUMMARY

Incident Type	Incident Date	Incident Time
Use of Force	5/31/2020	11:51 PM
Call Location	**Call Date**	**Call Time**
Little Rock	5/31/2020	11:51 PM
Incident County	**Incident Address**	
PULASKI	Arkansas State Capitol	

Incident City	Incident State	Incident Zip Code
LITTLE ROCK	AR	72209

Number of Subjects	Number of Vehicles
1	0

SUBJECT 1

The Subject is **Suspect**

Last Name	First Name	MI	Suffix
Unknown	N/A	N/A	N/A
Address	**City**	**State**	**Zip Code**
N/A	N/A	N/A	N/A

License Status	DL Number	DL State	DL Endorsements	DL Class	DL Restrictions
N/A	N/A	N/A	N/A	N/A	N/A

Telephone Number	DOB	Race	Sex
N/A	N/A	CAUCASIAN	Male

Height	Weight	Hair Color	Eye Color
N/A	N/A	N/A	N/A

Employer	Work Number
N/A	N/A

Work Address	Work City	Work State	Work Zip Code
N/A	N/A	N/A	N/A

Injury Transported	Transported By
☐Yes ☑No	N/A

Hospital Name	Hospital City	Hospital State
N/A	N/A	N/A

Additional Information
Suspect is completely unknown.

NARRATIVE

On 05/31/20 I, Cpl. Baethke, was assigned to the Arkansas State Police SWAT team during protests at the State Capitol. My responsibility was to provide lethal and less-lethal cover for the ERT team from the turret of our BEAR.

As the ERT team was clearing the crowd and approaching the main intersection in front of the capitol there was an unknown male standing on the southeast corner of the intersection. He had his shirt off and was shouting loudly at the ERT team. Members of the ERT team were deploying pepper balls at him with little to no effect. The suspect remained confrontational and agitated. He was also very close to the ERT team. The commands to leave, police presence, and pepper balls were unable to make the individual leave so I deployed one 40mm foam less-lethal round at the male. The round struck him in the stomach where it was intended and he was removed from the street by two other protestors.

No suspect information was obtained due to him leaving the area.

OFFICER

Rank	Officer Last Name	Officer First Name	Officer MI	Officer Suffix
CPL	Baethke	Jason	N/A	N/A

Officer Signature	Officer Department
Cpl Jason Baethke	STATE POLICE TROOP I
	Officer Badge Number: 20

Rank	Supervisor Last Name	Supervisor First Name	Supervisor MI	Officer Suffix
Sergeant	Margis	Brandon	N/A	N/A

Supervisor Signature	Supervisor Department
Sgt. Brandon M. Margis #678	STATE POLICE TROOP H
	Supervisor Badge Number: 678

ARKANSAS STATE POLICE

ASP 22

REV 04/02/2018

Use of Force Report Form

Name: Paul A. Meeks (First/MI/Last Name) Rank: TFC Badge#: 438

Division: Highway Patrol Troop/Co./Section: Troop J

Years of Service: 6 Age: 30 Race: White Sex: M Height: 5'11 Weight: 200

CID Case File Number ____ Troop Incident Number A-06/20-0694G ☐N/A

Incident Type (Check ALL that apply)
- ☑ Use of Force by Officer
- ☐ Vehicle Use of Force
- ☐ Tire Deflation Device Deploy
- ☐ Accidental Firearm Discharge
- ☐ Use of Force Against Officer (No Force Used by Officer)
- ☐ Canine

Intial Use of Force	Time	Date	Location - Address, City, State, County, Zip
	23:51	5/31/2020	500 Woodlane St. Little Rock, AR 72201

Location	Lighting	Artificial Light	Weather	Reason For Initial Encounter	Force Was Used While
Outdoors	Dark	Poor	Clear	Aiding Other ASP Employee	Other

☐ Video ☐ Audio ☐ Photographs

Suspect: ☐ Juvenile (Don't show name) ☐ N/A

Name (First/MI/Last)	Age	Sex	Race	Height	Weight	DOB
Unknown		M	W			

Suspect Profile

Prior History of Mental Illness ☐ Yes ☐ No ☑ Unknown

History of Violence ☐ Yes ☐ No ☑ Unknown

History of Assault Against LE Officers ☐ Yes ☐ No ☑ Unknown

Other: ____

Suspect Had Suicidal Inclination when Confronted ☐ Yes ☐ No ☑ Unknown

Condition of Suspect (Check ALL that apply)
- ☐ Prior Injuries
- ☑ Angry/Emotional
- ☐ Alcohol Intoxication
- ☐ Drug Intoxication
- ☐ Welfare Case
- ☐ Suicidal
- ☐ Other

Form Of Resistance By Suspect (Check all that Apply)
- ☑ Refused to Obey/Passive
- ☐ Refused to Obey/Physically
- ☐ Fled/Attempted
- ☑ Verbal Threat
- ☑ Aggressive Movement/Action/Weapon
- ☐ Other ____

Suspect Armed with ____ ☐ N/A

	Possessed	Threatened Use	Used as a Weapon		Possessed	Threatened Use	Used as a Weapon
Hands/Feet (Wrestled, Grasped, or Pushed)		☐	☐	OC Aerosol	☐	☐	☐
Hands/Feet (Struck Blow)		☐	☐	Edged Weapon	☐	☐	☐
Knee/Elbow/Body (Pushed)		☐	☐	Handgun	☐	☐	☐
Teeth		☐	☐	Officer's Firearm	☐	☐	☐
Motor Vehicle		☐	☐	Shotgun	☐	☐	☐
Club/Blunt Object	☐	☐	☐	Rifle	☐	☐	☐
Brass Knuckles	☐	☐	☐	Automatic Weapon	☐	☐	☐
Shocking Devise	☐	☐	☐	Explosive	☐	☐	☐
Chemicals	☐	☐	☐	Other ____	☐	☐	☐

Reason For Use of Force by Officer (Check Primary Reason Only)
- ☐ Protect Self
- ☑ Protect other Person
- ☐ Effect Arrest
- ☐ Prevent Escape
- ☐ Place in Protective Custody
- ☐ Maintain/Regain Control
- ☐ To End Pursuit

Assisted By ☐ None ☐ ASP Members ☐ Sheriff Dept ☐ Police Dept. ☐ Other ____

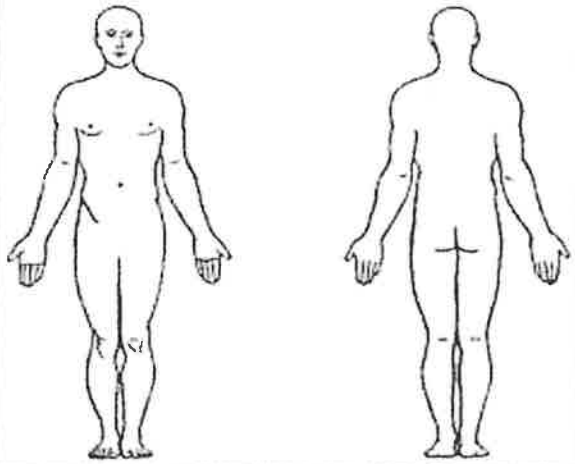
Name of Assisting Officer	Department of Assisting Officer

Tactics Used by Officer (Check ALL that were used)
- ☐ Wrestled, Grasped or Pushed
- ☐ Hands/Feet (struck Blow)
- ☐ Knee/Elbow/Body (Pushed)
- ☐ Knee/Elbow/Body (Struck Blow)
- ☐ Blocking Movement
- ☐ Control Hold
- ☐ Pain Compliance Hold
- ☐ Carotid Restraint
- ☐ Tear Gas
- ☐ OC Aerosol
- ☑ Diversion Devise
- ☐ Flashlight
- ☐ Baton
- ☐ Canine
- ☐ Motor Vehicle
- ☐ Tire Deflation Device Deployed
- ☐ Duty Handgun Fired
- ☐ Off Duty Handgun Fired
- ☐ CEW
- ☐ Backup Weapon Fired
- ☐ Shotgun Fired
- ☐ Rifle Fired
- ☐ Automatic Weapon Fired
- ☐ Other ____

Off Body Armor Worn	If Worn - Did Body Armor Prevent or Reduce Injury	Duty Status	Drug/Alcohol Screen Completed on Involved Trooper
☑ Yes ☐ No	☐ Yes ☑ No	☑ Yes ☐ No	☐ Yes ☑ N/A Date ____ Time ____ Location ____

Placement of Probes upon Deployment

(Place "X's" where probes struck the subject and "O" where the subject was drive stunned)



Officers Deploying CEW ☐ Single Officer ☐ Multiple Officers

CEW Deployment Distance

CEW Deployment Success ☐ Successful ☐ Failed

CEW Total # Cycles/Charges

CEW Deployment Type

Serial Numbers CEW Cartridge(s)

Probes Penetrate Skin ☐ Yes ☐ No

Probes Removed on Scene ☐ Yes ☐ No

Probes Removed by: ☐ Officer ☐ EMT ☐ Nurse ☐ Physician ☐ Suspect

Suspect Charged ☐ Yes ☑ No Charges: Suspects fled on foot

Suspect Incarcerated ☐ Yes ☑ No If Incarcerated, Name of Facility

Suspect Injured ☐ Yes ☑ No Injury Type **Suspect Hospitalized** ☐ Yes ☑ No ☐ Treated and Released to:

If Hospitalized, Name of Hospital

Attending Physician

Witness/Waiver to Refusal Suspect Refused Treatment ☐ Yes ☐ No

Suspect Deceased ☐ Yes ☐ No If Yes, Date and Time of Pronouncement Date Time

Name of coroner who pronounced suspect

Officer Injured ☐ Yes ☑ No Injury Type **Officer Hospitalized** ☐ Treated and Released to:

If Hospitalized, Name of Hospital ☐ Yes ☑ No

Attending Physician

Prosecuting Attorney Notified ☐ Yes ☐ No ☑ NA Prosecuting Attorney's Name

TFC Paul Meeks #438 — Signature of Reporting Officer (First/M/Last)

Badge No 438 Rank TFC Date 6/16/2020

Immediate Supervisors Determination ☐ CID ☐ Recommend Additional Investigation ☑ No Additional Investigation

Comments: TFC. Meeks used an appropriate amount of force

Sgt. Brandon M. Mayo #678 — Signature of Supervisor (First/M/Last)

Badge No 678 Rank Sgt. Date 6/17/2020

Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Jeff P. Sheeler — Signature of Commander (First/M/Last)

Badge No 457 Rank Lieutenant Date 06/17/2020

Division Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Signature of Commander (First/M/Last)

Badge No 250 Rank MAJOR Date 06/19/2020

Prosecuting Attorney's Recommendation ☐ Clear ☐ Pending ☐ Charges Filed ☐ NA Name

Incident Report Form
Arkansas Uniform

5.1.0

Incident Report Number
A-06/20-0694G

SUMMARY

Incident Type	Incident Date	Incident Time
Use Of Force	5/31/2020	11:51 PM
Call Location	**Call Date**	**Call Time**
Little Rock	5/31/2020	11:51 PM

Incident County	Incident Address
PULASKI	State Capital

Incident City	Incident State	Incident Zip Code
LITTLE ROCK	AR	72209

Number of Subjects	Number of Vehicles
1	0

SUBJECT 1

The Subject is

Suspect

Last Name	First Name	MI	Suffix
N/A	N/A	N/A	N/A

Address	City	State	Zip Code
N/A	N/A	N/A	N/A

License Status	DL Number	DL State	DL Endorsements	DL Class	DL Restrictions
N/A	N/A	N/A	N/A	N/A	N/A

Telephone Number	DOB	Race	Sex
N/A	N/A	CAUCASIAN	Male

Height	Weight	Hair Color	Eye Color
N/A	N/A	N/A	N/A

Employer	Work Number
N/A	N/A

Work Address	Work City	Work State	Work Zip Code
N/A	N/A	N/A	N/A

Injury Transported	Transported By
☐Yes ☑No	N/A

Hospital Name	Hospital City	Hospital State
N/A	N/A	N/A

Additional Information
N/A

NARRATIVE

On 5/31/20 I, TFC. Paul A. Meeks, was assigned to the Arkansas State Police SWAT team during the protests and riots near the State Capital. My responsibility was to provide lethal cover for the ERT team on their right flank as they attempted to clear the area of individuals who became violent and refused to leave the area.

As the ERT team was clearing the crowd near the main intersection of the State Capital, their was a unknown white male on the right flank of the team. He was shouting loudly at the team, and after multiple commands were given to the subject to leave the area, a member of the ERT Team deployed Pepperball rounds, but they were ineffective. The agitated male would not leave and remained confrontational. In an attempt to disperse the male I deployed a flash bang on the ground a few feet in front of him.

The male suspect then fled the area. No information was able to be retrieved from the suspect.

OFFICER

Rank	Officer Last Name	Officer First Name	Officer MI	Officer Suffix
TRP	Meeks	Paul	N/A	N/A

Officer Signature	Officer Department
TFC Paul Meeks #438	STATE POLICE TROOP J
	Officer Badge Number: 438

Rank	Supervisor Last Name	Supervisor First Name	Supervisor MI	Officer Suffix
Sergeant	Margis	Brandon	N/A	N/A

Supervisor Signature	Supervisor Department
Sgt. Brandon M. Margis #678	STATE POLICE TROOP H
	Supervisor Badge Number: 678

ARKANSAS STATE POLICE

Use of Force Report Form

ASP 22

REV 04/02/2018

Name: Craig S Teague (First/MI/Last Name) Rank: Sergeant Badge#: 494

Division: SWAT Troop/Co./Section: SWAT

Years of Service: 10 Age: 36 Race: White Sex: M Height: 5'10 Weight: 225

CID Case File Number ____ Troop Incident Number A-06/20-0694H ☐N/A

Incident Type (Check ALL that apply)
☒Use of Force by Officer ☐Accidental Firearm Discharge ☐Canine
☐Vehicle Use of Force
☐Tire Deflation Device Deploy ☐Use of Force Against Officer (No Force Used by Officer)

Intial Use of Force	Time	Date	Location - Address, City, State, County, Zip
	N/A	5-31-2020	500 Woodlane St, Little Rock, AR 72201

Location	Lighting	Artificial Light	Weather	Reason For Initial Encounter	Force Was Used While
State Capitol	Dark	Yes	Clear	Protest / Riot	Protecting ASP ERT members

☐Video ☐Audio ☐Photographs

Suspect: ☐Juvenile (Don't show name) ☒N/A

Name (First/MI/Last)	Age	Sex	Race	Height	Weight	DOB
Unknown						

Suspect Profile
Prior History of Mental Illness ☐Yes ☐No ☒Unknown History of Violence ☐Yes ☐No ☒Unknown
History of Assault Against LE Officers ☐Yes ☐No ☒Unknown Other:
Suspect Had Suicidal Inclination when Confronted ☐Yes ☐No ☒Unknown

Condition of Suspect (Check ALL that apply)
☐Prior Injuries ☒Angry/Emotional ☐Alcohol Intoxication ☐Drug Intoxication ☐Welfare Case ☐Suicidal ☐Other

Form Of Resistance By Suspect (Check all that Apply)
☐Refused to Obey/Passive ☐Verbal Threat
☒Refused to Obey/Physicially ☒Aggressive Movement/Action/Weapon
☐Fled/Attempted ☐Other

Suspect Armed with ____ ☒N/A

	Possessed	Threatened Use	Used as a Weapon		Possessed	Threatened Use	Used as a Weapon
Hands/Feet (Wrestled, Grasped, or Pushed)		☐	☒	OC Aerosol	☐	☐	☐
Hands/Feet (Struck Blow)		☐	☐	Edged Weapon	☐	☐	☐
Knee/Elbow/Body (Pushed)		☐	☐	Handgun	☐	☐	☐
Teeth		☐	☐	Officer's Firearm	☐	☐	☐
Motor Vehicle		☐	☐	Shotgun	☐	☐	☐
Club/Blunt Object	☐	☐	☐	Rifle	☐	☐	☐
Brass Knuckles	☐	☐	☐	Automatic Weapon	☐	☐	☐
Shocking Devise	☐	☐	☐	Explosive	☐	☐	☐
Chemicals	☐	☐	☐	Other ____	☐	☐	☐

Reason For Use of Force by Officer (Check Primary Reason Only)
☐Protect Self ☐Effect Arrest ☐Place in Protective Custody ☐To End Pursuit
☒Protect other Person ☐Prevent Escape ☐Maintain/Regain Control

Assisted By ☐None ☐ASP Members ☐Sheriff Dept ☐Police Dept. ☐Other

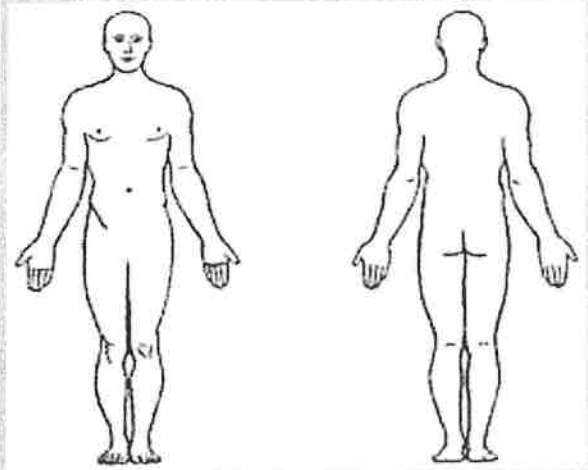
Name of Assisting Officer	Department of Assisting Officer

Tactics Used by Officer (Check ALL that were used)

☐Wrestled, Grasped or Pushed	☐Pain Compliance Hold	☐Baton	☐CEW
☐Hands/Feet (struck Blow)	☐Carotid Restraint	☐Canine	☐Backup Weapon Fired
☐Knee/Elbow/Body (Pushed)	☐Tear Gas	☐Motor Vehicle	☐Shotgun Fired
☐Knee/Elbow/Body (Struck Blow)	☐OC Aerosol	☐Tire Deflation Device Deployed	☐Rifle Fired
☐Blocking Movement	☐Diversion Devise	☐Duty Handgun Fired	☐Automatic Weapon Fired
☐Control Hold	☐Flashlight	☐Off Duty Handgun Fired	☒Other Pepperball, Stinger

Off Body Armor Worn	If Worn - Did Body Armor Prevent or Reduce Injury	Duty Status	Drug/Alcohol Screen Completed on Involved Trooper
☒Yes ☐No	☐Yes ☒No	☒Yes ☐No	☐Yes ☒N/A Date ____ Time ____ Location ____

Placement of Probes upon Deployment
(Place "X's" where probes struck the subject and "O" where the subject was drive stunned)



Officers Deploying CEW ☐ Single Officer ☐ Multiple Officers

CEW Deployment Distance

CEW Deployment Success ☐ Successful ☐ Failed

CEW Total # Cycles/Charges

CEW Deployment Type

Serial Numbers CEW Cartridge(s)

Probes Penetrate Skin ☐ Yes ☐ No

Probes Removed on Scene ☐ Yes ☐ No

Probes Removed by: ☐ Officer ☐ EMT ☐ Nurse ☐ Physician ☐ Suspect

Suspect Charged ☐ Yes ☒ No Charges:

Suspect Incarcerated ☐ Yes ☒ No If Incarcerated, Name of Facility

Suspect Injured ☐ Yes ☐ No Injury Type Unknown **Suspect Hospitalized** ☐ Yes ☐ No ☐ Treated and Released to:

If Hospitalized, Name of Hospital

Attending Physician

Witness/Waiver to Refusal Suspect Refused Treatment ☐ Yes ☐ No

Suspect Deceased ☐ Yes ☒ No If Yes, Date and Time of Pronouncement Date Time

Name of coroner who pronounced suspect

Officer Injured ☐ Yes ☒ No Injury Type **Officer Hospitalized** ☐ Treated and Released to:

If Hospitalized, Name of Hospital ☐ Yes ☒ No

Attending Physician

Prosecuting Attorney Notified ☐ Yes ☐ No ☒ NA Prosecuting Attorney's Name

Sgt. Craig S Teague
Signature of Reporting Officer (First/M/Last)
Badge No 494
Rank Sergeant
Date 6-11-2020

Immediate Supervisors Determination ☐ CID ☐ Recommend Additional Investigation ☑ No Additional Investigation

Comments: Sgt. Teague used the appropriate amount of force necessary

Sgt. Brian M. Mayo #678
Signature of Supervisor (First/M/Last)
Badge No 678
Rank Sergeant
Date 6/18/2020

Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Jeff ~~R.~~ S Sheeler
Signature of Commander (First/M/Last)
Badge No 457
Rank Lieutenant
Date 06/17/2020

Division Commanders Determination (Add Signature only when no additional investigation is required)

If Investigation Required, Conducted By ☐ OPS ☐ CID ☐ Designated Supervisor ☑ No Additional Investigation

Comments:

Signature of Commander (First/M/Last)
Badge No 260
Rank MAJOR
Date 06/19/2020

Prosecuting Attorney's Recommendation ☐ Clear ☐ Pending ☐ Charges Filed ☐ NA Name

Incident Report Form
Arkansas Uniform

5.1.0

Incident Report Number
A-06/20-0694H

SUMMARY

Incident Type	Incident Date	Incident Time
Use of Force	5/31/2020	11:00 PM
Call Location	**Call Date**	**Call Time**
State Capitol	5/31/2020	11:00 PM
Incident County	**Incident Address**	
PULASKI	500 Woodlane St	

Incident City	Incident State	Incident Zip Code
LITTLE ROCK	AR	72201

Number of Subjects	Number of Vehicles
2	0

SUBJECT 1

The Subject is **Suspect**

Last Name	First Name	MI	Suffix
Unknown	Unknown	N/A	N/A
Address	**City**	**State**	**Zip Code**
N/A	N/A	N/A	N/A

License Status	DL Number	DL State	DL Endorsements	DL Class	DL Restrictions
N/A	N/A	N/A	N/A	N/A	N/A

Telephone Number	DOB	Race	Sex
N/A	N/A	N/A	N/A

Height	Weight	Hair Color	Eye Color
N/A	N/A	N/A	N/A

Employer	Work Number
N/A	N/A

Work Address	Work City	Work State	Work Zip Code
N/A	N/A	N/A	N/A

Injury Transported	Transported By
☐Yes ☑No	N/A

Hospital Name	Hospital City	Hospital State
N/A	N/A	N/A

Additional Information
Subject 1 represents four (4) unknown suspects hidden behind a vehicle throwing objects at officers.

SUBJECT 2

The Subject is **Suspect**

Last Name	First Name	MI	Suffix
Unknown	Unknown	N/A	N/A

Address	City	State	Zip Code
N/A	N/A	N/A	N/A

License Status	DL Number	DL State	DL Endorsements	DL Class	DL Restrictions
N/A	N/A	N/A	N/A	N/A	N/A

Telephone Number	DOB	Race	Sex
N/A	N/A	AFRICAN AMERICAN	Male

Height	Weight	Hair Color	Eye Color
N/A	N/A	N/A	N/A

Employer	Work Number
N/A	N/A

Work Address	Work City	Work State	Work Zip Code
N/A	N/A	N/A	N/A

Injury Transported	Transported By
☐Yes ☑No	N/A

Hospital Name	Hospital City	Hospital State
N/A	N/A	N/A

Additional Information
N/A

NARRATIVE

On May, 31, 2020, at approximately 11:00PM, I was providing protection for members of the Arkansas State Police (ASP) and Army National Guard (ANG) Emergency Response (ERT) Teams during the riots at the State Capitol in a SWAT capacity. I was assigned a less lethal Pepperball system. In addition, on my kit, I was equipped with a less lethal Stinger device.

As we approached the front steps of the Capitol, the ERT Teams formed the front line and held. I observed multiple people throwing objects (frozen water bottles, rocks, fireworks, etc.) at officers. I noticed a group of approximately four subjects run behind a black car that was parked on the sidewalk beside the Capitol steps. The four subjects ducked behind the vehicle and began throwing objects at officers. I deployed the less lethal stinger device in the vicinity of the vehicle, which caused the subjects to leave their position and move north from the area. Immediately following the incident, I observed an unknown black male begin approaching the front line towards ASP and ANG ERT members. The subject was walking in an aggressive manner, his fists closed, and screaming at officers on the front line. I observed the subject push an ANG ERT member standing on the front line. An ASP ERT member attempted to push the subject back with his baton. The subject grabbed the baton and began attempting to pull it away from the officer. I deployed a volley of Pepperball rounds on the subject causing him to release the baton and step away from the front line. As I called for an ERT arrest team to move up, the subject ran north back into the crowd.

OFFICER

Rank	Officer Last Name	Officer First Name	Officer MI	Officer Suffix
SGT	Teague	Craig	N/A	N/A

Officer Signature	Officer Department
Sgt Teague 494	STATE POLICE TROOP A
	Officer Badge Number: 494

Rank	Supervisor Last Name	Supervisor First Name	Supervisor MI	Officer Suffix
Lieutenant	Sheeler	Jeff	N/A	N/A

Supervisor Signature	Supervisor Department
Lt Jeff Sheeler	STATE POLICE TROOP A
	Supervisor Badge Number: 457