



Conducted Electrical Weapon Reporting Form

To be completed by any Vermont Law Enforcement Officer after the display or deployment of a Conducted Electrical Weapon (CEW)

SECTION ONE: Display and/or Deployment Information

Case Number:	24BB012675	Location of Incident:	1203 Marlboro Rd. Brattleboro VT
Date of Incident:	12/16/2024	Time of Incident:	1253
CEW Model:	Taser 7	CEW Serial Number:	X40000MCTF
Use of CEW: Check all that apply	<input type="checkbox"/> CEW displayed		
	<input checked="" type="checkbox"/> Probes fired	Location where probes hit subject:	Torso and leg -Front
	<input type="checkbox"/> Drive stun mode	No. of cycles:	1
		Location where was CEW held against subject's body:	Back
Was a recording device running at the time of the incident? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, was it a <input checked="" type="checkbox"/> Body Cam <input checked="" type="checkbox"/> Dashboard Cam <input type="checkbox"/> other (describe):			
Was the subject: <input checked="" type="checkbox"/> Human OR <input type="checkbox"/> Animal (if animal, STOP here and submit form)			
Was subject charged with a crime? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>DC + Assault on Protected Professional</i> If yes, what charge(s):			

SECTION TWO: Incident Information

1. Subject Gender: <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male	2. Subject Age (if unknown, give an approximate guess): 41	3. Perceived race of subject at the time of display or deployment: <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Black or African-American <input type="checkbox"/> Hispanic or Latino <input checked="" type="checkbox"/> White <input type="checkbox"/> Unknown
4. Before deployment, did you have reason to believe the subject was a member of a special population? If yes, check all that apply. (If none apply, go to Question 6)		
<input type="checkbox"/> Pregnant <input type="checkbox"/> Elderly (Over the age of 55) <input type="checkbox"/> Child (Under the age of 16) <input type="checkbox"/> Low body-mass index (Body type is Thin) <input type="checkbox"/> Disability <input type="checkbox"/> Mental health condition <input type="checkbox"/> Developmental/intellectual disability	<input type="checkbox"/> Traumatic Brain Injury <input type="checkbox"/> Emotional crisis to the extent subject may have had difficulty understanding requests or orders <input type="checkbox"/> Epilepsy/seizure disorder <input type="checkbox"/> Heart condition <input type="checkbox"/> Deaf/hard of hearing <input type="checkbox"/> Low vision/blind	
5. How did you obtain information leading to your belief that the subject was a member of a special population? Check all that apply: <input type="checkbox"/> Subject notified officer <input type="checkbox"/> Civilian witness <input type="checkbox"/> Professional witness <input type="checkbox"/> Dispatch <input type="checkbox"/> Personal perception of the subject		
6. To the best of your knowledge, was the person under the influence of alcohol or other drugs at the time of the incident? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		
7. Were mental health or developmental disabilities professionals contacted for assistance with the subject? <input type="checkbox"/> No (If no, go to Section Three) <input checked="" type="checkbox"/> Yes		

If yes, contacted by: Officer or Someone Else (list whom): Police Social Worker

If yes, when?

- Prior to the display or deployment
- During the display or deployment
- After the display or deployment

Other comments:

8. What was the outcome of that attempt to contact mental health care or developmental disability professionals? Check all that apply:

- Professional assisted to resolve situation more promptly or with less coercion than without contact;
- Professional did not result in any positive or helpful impact on the situation;
- Professional provided limited positive or helpful impact on the situation;
- Contact was attempted but no one could be reached;
- Professional helped reduce the time officers had to be at the scene;
- Professional helped avoid involuntary placement in detention or emergency department;
- Professional helped provide appropriate follow-up and service provision;
- Intervention was ineffective.

SECTION THREE: ADDITIONAL INFORMATION

Decision to use CEW was based on:

- Active aggression of subject;
- Active resistance of subject, with injuries to others or subject likely to occur;
- Anticipated injuries to subject, officer, or others at scene.

What was the subject's response to the use of the CEW?

- Subject was compliant directly after use of CEW;
- Subject was not compliant directly after use of CEW, requiring additional force;
- CEW failed; subject had to be handled through other means. State reason for failure if known:

Was any other force used in addition to the CEW? Check all that apply:

- OC
- Firearm
- Physical force
- Baton
- other (describe):

Was this additional use of force before or after use of the CEW? Before After

Was medical assistance provided to the subject following the use of the CEW? Yes No

If yes, by whom? Officer EMS personnel Other emergency or health care professionals

Check any box below relating to noteworthy details not already described:

- Incident occurred on an elevated location such as a roof, stairs, or bridge;
- Subject was near or in water at time of incident;
- Subject was wearing heavy clothes;
- Subject was more than 25 feet away when CEW probe shot;
- Subject was fleeing when CEW probe shot.

Was the training "Interacting with People Experiencing a Mental Health Crisis" (also known as Act 80 training) useful in dealing with this incident? Yes No N/A

If no, describe why not:

Return this completed form via scan or email to:

Executive Director Richard Gauthier
Vermont Criminal Justice Training Council
317 Academy Road, Pittsford, VT 05763
Tel: (802)483-6228 Fax: (802)483-2343
Richard.Gauthier@state.vt.us

Christopher, brickell @ Vermont. gov

TASER DEPLOYMENT

Incident Number: 24BB012675

Taser Serial Number: X4000MCTF

Level of Deployment: Unholstered Aim/Laser Only Spark Demo
 Stun Gun Darts Deployed

Did the level of deployment used result in compliance? Yes No

How many cartridges were deployed? 1 One Unit Multiple Units

From what distance? Approximately 10 Feet How many probes hit? 2

Probe Penetration: 1 probe skin/1 probe clothing 1 probe skin/1 probe miss Both probes skin
 1 probe clothing/1 probe miss Both probes clothing

Subject under the influence? Yes No Unknown

If yes: Drugs Alcohol Emotionally Disturbed Unknown

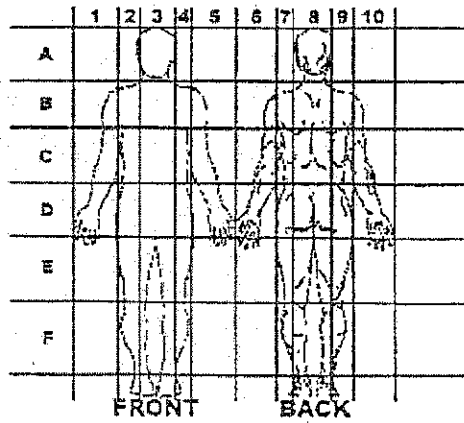
How were probes removed and by whom? Fell out during arrest

Comments made by the subject during and/or after Taser deployment:

Whats your taser gonna do, you f***** tased me.

Taser deployed: 1. Take the Taser off line as in "out of service." 2. Notify a Taser instructor to conduct a data download. 3. Submit data download within 48 hours of submitting this report to include incident #.

Probe Impact Points



First Cartridge

Top Probe C3

Bottom Probe E3

Second Cartridge

Top Probe _____

Bottom Probe _____

Describe where the probes hit using the graph (see above—specify where on the body the probe impacted - for example if a probe hit in the hand in front of the man's chest, mark the hand, not the chest). For example, a hit to the center of the chest would be "B-3". A hit to the lower back would be "C-8"