



**SUPERVISORY
ADVANCED TASER USE REPORT**

Subject's Name: Report Date:

Location: Booked:

Charges:

Officer's Name: Sgt.:

Lt.: ADV. TASER Serial #:

Medical Facility: Doctor:

OR#: Fire DR#:

Date of the Incident: Time of Incident:

Location of the Incident:

Officer(s) Involved:

Nature of the Call
or Incident:

Type of Force Used (Check all that apply): Physical Less-lethal Firearm

Nature of the Injuries and Medical Treatment Required:

Admitted to Hospital for Injuries:

Admitted to Hospital for Psychiatric:

Medical Exam:

Summary of the Actions of Officer(s) Involved:

Was an Officer, Police Employee, Volunteer or Citizen Injured?:

Incident Type [check appropriate response(s) below]

- Civil Disturbance Violent Suspect Warrant Service
 Suicidal Barricade Other

Age:
Height:

Sex:
Race:

Build: Heavy Medium Trim

Suspect wearing heaving clothes:

ADV. TASER Application: Actual Use Arc Display Only Display Only

ADV. TASER Use Mode: Dart Probe Contact Touch Stun Contact

Approximate target distance at the time of the dart launch:

Need for an additional shot?:

Did dart contacts penetrate the subject's skin?:

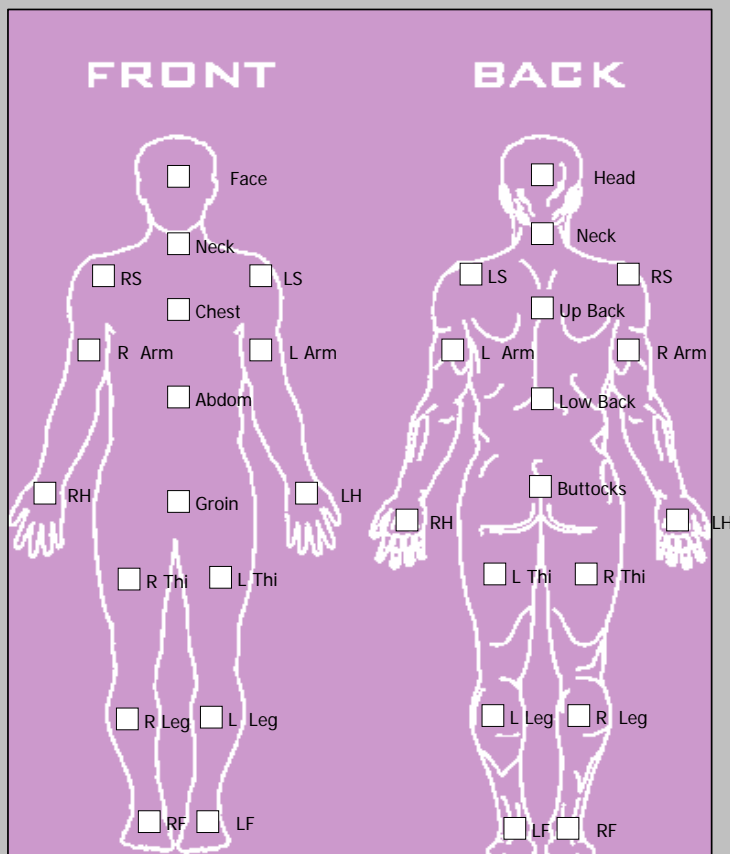
Regarding the ADV. TASER:

Did the application cause injury:

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

DESCRIPTION OF INJURY:

APPLICATION AREAS - Points of contact



SYNOPSIS:

Need for additional applications?:
Did the device respond satisfactorily?:

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

Suspect Under the influence:
Confirmed by:

Describe the danger present:

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

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 ADVANCED TASER incident database.

Email to: Jami@taser.com

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

This information will be submitted to the International Chiefs of Police Association to track use of force.

3. If you cannot email, please fax a copy of this report to: (480) 991-0791 Attn: Jami Hill (PH: 800-978-2737 ext. 2016)
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.