

Columbus Division of Police Use of Taser Report

Incident # _____

Taser Serial # _____

Cartridge Serial # _____ Property # _____ Submitted By _____

of Cycles _____ Penetration Skin Clothing Miss

Taser Use Effective Yes No Deployment Successful Yes No


Cartridge Serial # _____ Property # _____ Submitted By _____

of Cycles _____ Penetration Skin Clothing Miss


Taser Use Effective Yes No Deployment Successful Yes No

Drive Stun


of Cycles _____ # of Applications _____ Counter Pressure Used Yes No




Front



R. Side



Back



L. Side

Mark **Probe Hits** on Body With Circle and (#)

Mark **Drive Stuns** on body with X

Taser Probe Removal None Medic Hospital Personnel Subject Other

Subject Injury Resulting from Taser None Minor Serious

Incident Type _____

Subject Influence Yes No If Known, Specify _____

Deploying Personnel _____

Signature
Badge

Supervisor _____

Signature IBM #