

PEACE OFFICER INVOLVED INJURIES OR DEATH REPORT

As required by Art. 2.139 of the Texas Code of Criminal Procedure, law enforcement agencies shall report all officer-involved injuries or deaths caused by the discharge of a firearm. Pursuant to the requirements of Art. 2.139, the following reporting form has been created for reporting such incidents.

"Officer involved injury or death" means an incident during which a peace officer discharges a firearm causing injury or death to another." Art. 2.139 Gode of Criminal Procedure.

Email or Fax completed form to: officershootingreport@texasattorneygeneral.gov or Fax (512)463-9912

AGENCY/FACILITY INFORMATION			
Name of Agency/Facility Fro	eeport Police Department		
Address 430 N Brazos	port Blvd.		
City Freeport		Zip Code 77541	
Telephone Number (979)	239-1211	9	
Signature of Director of Agen	icy/Facility (Required)	- Comme	
Name of Person Filling Out Fo	Pamela Morris	0	
Email of Person Filling Out Fo	rm pmorris@freeport.tx.us		
1. WHAT WAS THE INJURED OR DECEASED'S GENDER?		8. WHAT WAS THE PEACE OFFICER'S GENDER?	
☑ Male ☐ Female		☑ Male ☐ Female	
2. WHAT WAS THE INJURED OF	R DECEASED'S AGE AT TIME OF INCIDENT?	9. WHAT WAS THE PEACE O	FFICER'S AGE AT THE TIME OF THE INCIDENT
30 □ Not Available		27	
3. WHAT WAS THE INJURED OR DECEASED'S RACE/ETHNICITY? (Mark one based on information reported on state driver license application, state identification card application, or other government reported identification if available and known. If not available, mark not available.)		10. WHAT WAS THE PEACE OFFICER'S RACE/ETHNICITY? (Mark only one)	
		☐ American Indian	☐ Black or African American
☐ American Indian	Black or African American	or Alaska Native	☑ Hispanic or Latino
or Alaska Native	☐ Hispanic or Latino	☐ Anglo or White	□ Other
☐ Anglo or White	□ Other	☐ Asian or Pacific Islande	er
☐ Asian or Pacific Islander	☐ Not Available	11. DURING THE INCIDENT, PEACE OFFICER WAS:	
4. DATE OF INCIDENT		☑ On Duty ☐ Off Duty	
Month 09 Day	02 _{Year} 2015		
		12. PEACE OFFICER WAS RI	ESPONDING TO CALL OR REQUEST WITH ON
5. LOCATION OF INCIDENT Street address 1010 Magnolia Street		☑ Yes □ No	
City Freeport			
County Brazoria Zip 77541		13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:	
county 21p		☐ Emergency Call or Request for Assistance	
6. INCIDENT RESULTED IN:		₹ Traffic stop	
☑ Injury □ Death		Execution of a warrant	
7. INJURED OR DECEASED PERSON:		Hostage, barricade, or other emergency situation	
☐ Carried, exhibited or used a deadly weapon		Other – Specify type of call	
Did not carry, exhibit or us		narcotic stop and o	evading arrest