

## 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

DATE OF REPORT 12/05/20			
AGENCY/FACILITY INFORMATI	ON ving Police Department		
Name of Agency/Facility 11 Address 305 N. O'Con	ving Police Department		
	IIIOI TOOM		75061
City Irving (972)	721-2471	Zip Cod	e 75061
Telephone Number (972)		R-1)	
Signature of Director of Age	orm Michael Coleman		
Name of Person Filling Out Fo	mcoleman@cityofirving.org		
Email of Person Filling Out Fo			
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 OR DECEASED'S AGE AT TIME OF INCIDENT?		9. WHAT WAS THE PEACE OFFICER'S AGE AT THE TIME OF THE INCIDENT	
24 Not Available		35	
DESCRIPTION OF THE PROPERTY OF THE PARTY OF			
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 en
Asian or Pacific Islander	☐ Not Available	11. DURING THE INCIDENT, PEAGE OFFICER WAS:	
4. DATE OF INCIDENT		💋 On Duty 🔲 Off Duty	
Month 12 Day	05 Year 2015		
5. LOCATION OF INCIDENT		12. PEACE OFFICER WAS R OR MORE OFFICERS:	ESPONDING TO CALL OR REQUEST WITH ONE
Street address 600 block Jeff Ct.		Ø Yes □ No	
City Irving		12 MODELE COMPOSED	NUMBER OF ACA PROUT OF A
County Dallas Zip 75060		13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:	
		☑ Emergency Call or Request for Assistance	
6. INCIDENT RESULTED IN:		☐ Traffic stop ☐ Execution of a warrant	
□ Injury ☑ Death		☐ Hostage, barricade, or other emergency situation	
7. INJURED OR DECEASED PERSON:		Other - Specify type of call	
☑ Carried, exhibited or used a deadly weapon			
Did not carry, exhibit or us	se a deadly weapon		