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## 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 Code of Criminal Procedure.

**Email completed form to:** officershootingreport@texasattorneygeneral.gov

| DATE OF REPORT  |                                     |  |   |
|---|-------------------------------------|--|---|
| AGENCY/FACILITY INFORMATION  Name of Agency/Facility  Address  For Box  City  AUST'N  Telephone Number  5 12  | Austin Police Depar<br>689001       | tment Zip Code   | 78788                                   |
| Signature of Director of Agend  | , , , , ,                           |  |   |
|   | rm Scott Ehlert                     |  |   |
| Email of Person Filling Out For   | m_scoff, ehlert@                    | ausduxexas   | 5, gov                                  |
| 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 IN HIDED OD  | DECEASED'S AGE AT TIME OF INCIDENT? | O WHAT WAS THE DEACE OFF   | ICER'S AGE AT THE TIME OF THE INCIDENT? |
| 47  | □ Not Available                     | 3  | ICEN S AGE AT THE TIME OF THE INCIDENTS |
| 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 OF (Mark only one)  American Indian                     | FFICER'S RACE/ETHNICITY?                |
| ☐ 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 Islander  |   |
| ☐ Asian or Pacific Islander ☐ Not Available   |                                     | 11. DURING THE INCIDENT, PEACE OFFICER WAS:                                    |   |
| 4. DATE OF INCIDENT  Month 0  |                                     | ☐ On Duty ☐ Off Duty   |   |
|   |                                     | 12. PEACE OFFICER WAS RESPONDING TO CALL OR REQUEST WITH ONE OR MORE OFFICERS: |   |
| 5. LOCATION OF INCIDENT   | ( ()                                | ☐ Yes ☐ No   |   |
| Street address 11512 Olson Drive  |                                     | 13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:                              |   |
| City Austin   |                                     | <b>□</b> £mergency Call or Request for Assistance                              |   |
| County Travis zip 78750   |                                     | ☐ Traffic stop   |   |
| 6. INCIDENT RESULTED IN:   Injury Death   |                                     | ☐ Execution of a warrant   |   |
|   |                                     | ☐ Hostage, barricade, or other emergency situation                             |   |
| 7. INJURED OR DECEASED PERSON:  |                                     | ☐ Other — Specify type of call   |   |
| Carried, exhibited or used  |                                     |  |   |
| Did not carry, exhibit or us  | e a deadly weapon                   |  |   |