DATE OAG RECEIVED	



## 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 11/29/20	016		
AGENCY/FACILITY INFORMATION	ON .		·
Name of Agency/Facility Te	xas Department of Public Safe	ety	
Address 12230 West F			
		Zip Code 77065	
Telephone Number (281)	517-1200	,	
Signature of Director of Ager	ncy/Facility (Required)	man	
Name of Person Filling Out Fo	Texas Ranger Wesley Doc	little	
	rm Wesley.Doolittle@dps.texa		
1 WHAT WAS THE IN HIDED OF	D DECEASED'S CENDEDS	8 WHAT WAS THE DEACE O	SECUCED'S CENDEDS
1. WHAT WAS THE INJURED OR DECEASED'S GENDER?  ✓ Male ☐ Female		8. WHAT WAS THE PEACE OFFICER'S GENDER?  Male  Female	
Male Grennale		Walle La remaie	
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?	
36	☐ Not Available	49	
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		10. WHAT WAS THE PEACE OFFICER'S RACE/ETHNICITY? (Mark only one)	
and known. If not available, mark no		☐ 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	r
☐ Asian or Pacific Islander	■ Not Available	11. DURING THE INCIDENT,	PEACE OFFICER WAS:
4. DATE OF INCIDENT		✓ On Duty □ Off Duty	
Month 11 Day	22 <sub>Year</sub> 2016 <sub>Min</sub> 26	12. PEACE OFFICER WAS RESPONDING TO CALL OR REQUEST WITH ONE OR MORE OFFICERS:	
5. LOCATION OF INCIDENT		¥ Yes □ No	
Street address 6914 Inte	erstate 10	13 INCIDENT OCCURRED D	NIDING OD AS A DESILIT OF A
City Baytown		13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:  ### Emergency Call or Request for Assistance	
County Harris Zip 77521		Traffic stop	
		Execution of a warrant	
6. INCIDENT RESULTED IN:  Injury  Death			
7. INJURED OR DECEASED PERSON:		☐ Hostage, barricade, or other emergency situation ☐ Other — Specify type of call	
☑ Carried, exhibited or used	a deadly weapon	- other - openity type of	vaii
☐ Did not carry, exhibit or us			