



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 10/25/2016

AGENCY/FACILITY INFORMATION

Name of Agency/Facility San Antonio Police Department

Address 315 S Santa Rosa

City San Antonio Zip Code 78207

Telephone Number (210) 207-7273

Signature of Director of Agency/Facility (Required) [Signature]

Name of Person Filling Out Form Det. Rachel Barnes #2510

Email of Person Filling Out Form rachel.barnes@sanantonio.gov

1. WHAT WAS THE INJURED OR DECEASED'S GENDER?

Male Female

8. WHAT WAS THE PEACE OFFICER'S GENDER?

Male Female

2. WHAT WAS THE INJURED OR DECEASED'S AGE AT TIME OF INCIDENT?

58 Not Available

9. WHAT WAS THE PEACE OFFICER'S AGE AT THE TIME OF THE INCIDENT?

38

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.)

- American Indian
- Black or African American
- or Alaska Native
- Hispanic or Latino
- Anglo or White
- Other
- Asian or Pacific Islander
- Not Available

10. WHAT WAS THE PEACE OFFICER'S RACE/ETHNICITY?

(Mark only one)

- American Indian
- Black or African American
- or Alaska Native
- Hispanic or Latino
- Anglo or White
- Other
- Asian or Pacific Islander

4. DATE OF INCIDENT

Month October Day 24 Year 2016

TIME: Hour 12 Min 36 AM PM

11. DURING THE INCIDENT, PEACE OFFICER WAS:

On Duty Off Duty

5. LOCATION OF INCIDENT

Street address 10603 Nacogdoches Rd

City San Antonio

County Bexar Zip 78217

12. PEACE OFFICER WAS RESPONDING TO CALL OR REQUEST WITH ONE OR MORE OFFICERS:

Yes No

6. INCIDENT RESULTED IN: Injury Death

13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:

- Emergency Call or Request for Assistance
- Traffic stop
- Execution of a warrant
- Hostage, barricade, or other emergency situation
- Other – Specify type of call _____

7. INJURED OR DECEASED PERSON:

- Carried, exhibited or used a deadly weapon
- Did not carry, exhibit or use a deadly weapon