

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 08/26/2016	<u> </u>
AGENCY/FACILITY INFORMATION	
Name of Agency/Facility Rockwall County Sheriff's Off	ice
Address 972 T.L. Townsend Drive	
_{City} Rockwall	Zip Code 75087
Telephone Number (972) 204-7001	219 0000
Signature of Director of Agency/Facility (Required)	Wayenson
Name of Person Filling Out Form Captain Greg Welch	in autro
Email of Person Filling Out Form gwelch@co.rockwall.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 OR DECEASED'S AGE AT TIME OF INCIDE	9. WHAT WAS THE PEACE OFFICER'S AGE AT THE TIME OF THE INCIDENT?
45 □ Not Availab	ole 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	10. WHAT WAS THE PEACE OFFICER'S RACE/ETHNICITY? (Mark only one)
and known. If not available, mark not available.)	☐ 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 Islander
☐ Asian or Pacific Islander ☐ Not Available	11. DURING THE INCIDENT, PEACE OFFICER WAS:
4. DATE OF INCIDENT	✓ On Duty ☐ Off Duty
Month August Day 05 Year 2016	
TIME: Hour 1 Min 36 MAM P	12. PEACE OFFICER WAS RESPONDING TO CALL OR REQUEST WITH ONE OR MORE OFFICERS:
5. LOCATION OF INCIDENT	☐ Yes ☑ No
Street address 600 Blk of State Hwy 205	13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:
City Mclendon-Chisholm	□ Emergency Call or Request for Assistance
County Rockwall Zip 75032	 ☐ Traffic stop
	Execution of a warrant
6. INCIDENT RESULTED IN: 📈 Injury 🗆 Death	
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 use a deadly weapon	